

I annual health report



1972

**ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
IN RESPECT OF THE YEAR 1972 FOR THE BOROUGH
OF SCUNTHORPE IN THE COUNTY OF LINCOLN PARTS
OF LINDSEY**

BOROUGH OF SCUNTHORPE
HEALTH AND MARKETS COMMITTEE

1972

Mayor - Councillor W.M. Wilkinson J.P.

Chairman - Councillor C. Nottingham

Vice-Chairman - Councillor H. Hirst

Alderman Mrs. J.M. Abey
" E. Austin J.P.
" C. Newlove
" H. Spencer
" Mrs. V. Wilnshurst

Councillor J.P. Beverley
" Mrs. A.I. Cropper
" F.G. Dring
" O. Duffelen
" L. Foster
" E.C. Linnell
" R. Ross
" W.P. Scott

Co-opted members - Dr. R.H. Foxton and
Dr. K.R. Allardyce

Co-opted members under Chronically Sick and
Disabled Persons Act, 1970 - Mrs. S. J. Bromby,
Messrs. J. Goodyear and K. Traviss.

HEALTH DEPARTMENT

Telephone No. 3463
(Internal Exchange)

Comforts Avenue,
Scunthorpe,
Lincs.,
DN15 6PW.

Medical Officer of Health and Medical Referee to the Borough Crematorium

S. CHILDS, M.A., M.B., Ch.B., D.P.H., D.T.M. & H., D.P.A.
(Home Telephone No. 3867)

Deputy Medical Officer of Health and Deputy Medical Referee to the
Borough Crematorium

N. D. PATON, M.B., Ch.B., D.P.H., D.T.M. & H.
(Home Telephone No. 2927)

Chief Public Health Inspector

G. O. ALLEN, F.A.P.H.I., M.Inst.P.C., Cert. Meat Inspector
(Home Telephone No. 5685)

Deputy Chief Public Health Inspector

L. J. HOWSON, M.A.P.H.I., Cert. Meat Inspector, A.M. Inst. P.C., M.R.S.H.

Public Health Inspectors - Establishment 4

K. ARTIST, M.A.P.H.I., Cert. Meat Inspector, M.I.S.A.A., A.M.R.S.H.
J. A. PARISH, M.A.P.H.I., Dip Smoke Inspector
J. F. ROBINSON, M.A.P.H.I., Cert. Meat Inspector, A.M. Insp. P.C., A.M.R.
D. B. WHITE, M.A.P.H.I., Cert. Meat Inspector, M.R.S.H.

Pupil Public Health Inspector

K. J. TAYLOR

Technical Assistants - Smoke Control

MISS D. FIRTH (Senior Assistant)
MISS A. BROOKS (Appointed 1.3.72)

Clerical Officers

R. SYKES
R. W. SYKES
MRS. M. DAVISON (Appointed 7.2.72)
MRS. M. BASSINDALE (Resigned 6.2.72)
MISS V. E. FELL
MRS. E. A. ROBERTS (Resigned 31.7.72)

Cleansing Depot Manual Staff

R. HILL (General Foreman)
81 Workmen

Public Convenience Attendants

3 Whole-time Driver-Cleaners
4 Part-time Female Cleaners

Infectious Diseases Nurse

MRS. M. FORD, S.R.N., R.F.N. (Home Telephone No. 4634)

Chief Clerk

F. HENRY, M.R.S.H.

Senior Administrative Assistant

P. T. KITCHING, A.M.R.S.H.

Clerical Officers

MRS. N. GREY
J. P. M. SCHERER (Resigned 13.11.72)

Clerks

MISS C. A. ATKINSON (Appointed 21.8.72)
MISS J. BARROWCLIFFE
MISS R. BOOTHBY
MRS. C. BRATTEN
MRS. B. CUNNINGHAM
MRS. P. CUTHBERT (Resigned 30.9.72)
MRS. B. P. DARTON (Appointed 11.12.72)
MRS. M. DEE
MRS. S. HENDERSON (Appointed 4.9.72, Resigned 13.10.72)
MRS. J. INGALL (Resigned 11.2.72)
L. JACKSON (Resigned 31.7.72)
MRS. B. McCUBBIN (Resigned 3.9.72)
MRS. P. MILNER
MRS. M. OUTRAM (Appointed 29.9.72)
MRS. O. G. PORTER (Appointed 1.1.72)
MRS. J. ROBINSON (Resigned 25.8.72)
MRS. M. SIDDALL
E. TILTMAN
MISS D. WILSON

Mortuary Assistant

A. COLE

Housing Welfare Officer

MISS M. B. LEAVER

Welfare Assistant

MRS. K. WEST (Appointed 13. 6. 72)

Wardens

- *MRS. Y. C. COLLINSON (Resigned 31.7.72)
- *MRS. J. DAVIES
- *MRS. A. B. HARRIS (Appointed 1.8.72)
- *MRS. P. PIDD
- *MRS. J. WILLSMORE

Relief Wardens

- *MRS. K. AITKEN (Resigned 31.12.72)
- *MRS. H. BRANSON
- *MRS. H. FRANCE (Appointed 8.10.72)
- *MRS. E. M. SMART
- *MRS. G. WALKER (Ceased 7.10.72)

Peripatetic Wardens (Establishment 5)

- *MRS. M. BEVERLEY (Appointed 1.10.72)
- *MRS. J. D. DUNKELD (Appointed 1.5.72)
- *MRS. M. B. JACKSON (Appointed 1.9.72)
- *MRS. G. SMITH (Appointed 11.9.72)

Attendants on the Aged and Infirm

- *MRS. J. COWLEY
- *MRS. A. HOWARD (Appointed 14.8.72)
- *MRS. D. C. JEFFERSON
- *MRS. D. R. KELLY (Appointed 4.9.72)
- *MRS. M. PEART (Appointed 4.9.72)
- *MRS. M. H. RILEY
- *MRS. N. WREN (Appointed 4.9.72)

DELEGATED HEALTH SERVICES STAFF

Assistant Medical Officers of Health

H.L. LAING, L.R.C.S.I., L.R.C.P.I., L.M. ROTUNDA
NORA M. LAING, L.R.C.S.I., L.R.C.P.I.

Area Dental Officers

P.A. BETTS, L.D.S.
MRS. M. CLAYTON, B.D.S., L.D.S.

Senior Dental Officer

J. McCUTCHEON, L.D.S. (Retired 31.12.72)

Part-time Dental Officer

*MISS K.N. LAWLOR (Appointed 9.5.72)

Dental Auxiliary

MISS A.L. ROBINSON

Dental Surgery Assistants

MRS. S. ALLINSON
*MRS. S. BARRY (Resigned 25.8.72)
MRS. N.B. RYSDALE
MRS. D. SPENCER
MISS H. WALSH
MRS. R.J. HORSLEY (Appointed 22.11.72, Resigned 17.12.72)

Area Nursing Officer

MRS. G.F. O'REILLY, S.R.N., S.C.M., R.F.N., Q.N. (Appointed 15.4.72)
66942

Nursing Officer (Health Visiting)

MISS F.B. GISSEL, S.R.N., S.C.M., H.V. Cert. (Appointed 15.4.72)

Health Visitors (Establishment Whole-time 17)

MRS. P. ELLIOTT S.R.N., S.C.M., H.V. Cert., Group Adviser
MISS D.M. BALE, S.R.N., S.C.M., H.V. Cert. (Resigned 14.2.72)
*MRS. J. BIRTWHISTLE, S.R.N., H.V. Cert.
*MRS. L.I. BRASIER, S.R.N., H.V. Cert.
MISS W. DAVIS, S.R.N., S.C.M., H.V. Cert.
MRS. H.M. ELVIDGE, S.R.N., S.C.M., H.V. Cert.
*MRS. G. GALES, S.R.N., S.C.M., H.V. Cert.
MRS. J. HUGHES, S.R.N., S.C.M., H.V. Cert.
MRS. M.S. MARTIN, S.R.N., H.V. Cert.
MISS S.E. RANBY, S.R.N., S.C.M., H.V. Cert.
*MRS. F.O. ROUSE, S.R.N., S.C.M., H.V. Cert.
*MRS. G. SUTHERLAND, R.G.N., H.V. Cert.
MRS. A. WELCH, S.R.N., S.C.M., H.V. Cert.

Nursing Officer (Home Nursing)

MRS. H. SHARPLES, S.R.N., S.C.M., H.V. Cert. (Appointed 15.4.72)

Midwives (Establishment 5)

MRS. K. BEDELLS, S.C.M.	3767
MRS. M. CODDINGTON, S.R.N., S.C.M.	67968
MRS. R. H. GREEN, S.C.M.	61772
MRS. J. M. O'NEILL, S.R.N., S.C.M.	4321
*MRS. C. A. HUGHES, S.R.N., S.C.M., Q.N. (Appointed 1.1.72)	

District Nurses (Establishment 17)

R. J. CHIVERS, S.R.N., Q.N.	Burton-on-Stather 694
*MRS. S. DOWSON, S.E.N., S.C.M.	61403
MRS. A. DRINKALL, S.R.N.	68660
MRS. B. FIDLING, S.R.N., Q.N.	66781
MRS. M. M. HARVEY, S.R.N., Q.N.	66707
MRS. B. HAWKE, S.E.N., Q.N.	4954
MRS. A. J. LYONS, S.R.N., Q.N.	61069
MRS. M. MAJOR, S.R.N., Q.N.	5206
MRS. J. MARPER, S.R.N.	Scawby 378
MRS. M. MARSHALL, S.R.N.	67514
MRS. J. MELNYK, S.R.N., Q.N.	66979
MRS. P. M. OATES, S.R.N.	2750
MRS. B. PEART, S.R.N., Q.N.	4081
MRS. B. PRIESTMAN, S.R.N., Q.N.	61640
MRS. K. RISPIN, S.R.N., Q.N.	3706
MRS. R. M. TAYLOR, S.R.N., Q.N.	67438
MRS. J. WOAD, S.R.N., Q.N.	5672
D. W. WREN S.R.N.	61924

Bathing Auxiliaries

- *MRS. A. B. HARRIS (Resigned 31.7.72)
- *MRS. D. HAVERCROFT
- *MRS. B. MORLEY
- *MRS. M. WILLIAMS
- *MRS. D. JUDD (Appointed 18.9.72)
- *MRS. D. R. SERGEANT (Appointed 24.1.72)

Clinic Nurses

- *MRS. J. BOYNTON, S.R.N.
- *MRS. P. A. COLEMAN, S.R.N.
- *MRS. M. FOSTER, S.R.N.
- *MRS. E. M. E. LAURENCE, S.R.N.
- *MRS. K. I. McCOURT, S.R.N.
- *MRS. D. OWEN, S.R.N.
- *MRS. J. PARKIN, S.R.N. (Resigned 31.8.72)
- *MRS. J. PLUMTREE, S.R.N.
- *MRS. F. REVELL, S.E.N.
- *MRS. K. A. SAUNDERS S.R.N.

Chiropodists (3)

J. GARDNER, M.Ch.S., S.R.Ch.
H. PETCH, S.R.Ch.
L. WHITE, M.Ch.S., S.R.Ch.

Speech Therapist

MISS C. COULTHURST (Resigned 31.7.72)

School Nurse

MRS. M. WILLSMORE, S.R.N.

Audiometristian

*MRS. M. M. O'HARA

Vaccination Assistant

*MRS. W. J. LOWE, S.R.N.

Clinic Clerk

MISS M. BURFORD

ANNUAL REPORT 1972

To the Chairman and Members of the Health Committee,

Far be't frae me that I aspire
To blame your legislation,
Or say, ye wisdom want, or fire
To rule this mighty nation:
But faith! I muckle doubt, my sire,
Ye've trusted ministration
To chaps wha in a barn or byre
Wad better fill'd their station,
Than courts yon day.

Robert Burns.

This is quite certainly the last full report which will be made by a Medical Officer of Health for the Borough of Scunthorpe because much of the Registrar General's information on statistics is never in the hands of the Medical Officer of Health before April of the next year, and by April, 1974, there will be no Medical Officer of Health to write a report for the Borough Council, which will in fact be a District Council by then.

The illustrations on the cover of the report this year show two pictures, the first is a picture of the usual habitat of that somewhat rare creature the Medical Officer of Health. In this town, as in many other towns, his habitat is usually a third rate building which has been abandoned by other local authority denizens for more luxurious surroundings. The building shown was in fact built during the 1939/45 war as a gas decontamination and cleansing station. The second picture shows a Medical Officer of Health in his lair, this picture will shortly become irreplaceable when the whole species, which is rapidly being hunted to extinction, dies out in this country and in Scunthorpe.

The whole of the last twelve months has been taken up with discussions and preparation for the Health Service Reorganisation which is likely to be carried out with a modicum of success, not by any intrinsic merits in the new ministration, but simply and mainly by the tolerance, patience and good will of all the thousands of Doctors, Nurses and other Health Workers who will carry on with the work they know should be done, in the face of a certain vacuum of direction, counsel or advice from a ministration which appears to be rapidly developing as its aim, not the improvement of the services to the patient, but the elevation of ministration to the status of an end in itself.

There is a curious anomaly in all thinking about health administration which does not occur elsewhere in public administation. In education a head teacher is always in charge of a school and a trained teacher is invariably in charge of an Education Department.

In the Army, Navy and Airforce it is always an experienced and trained regular officer who is in charge at every senior level. No one seriously suggests that any of Her Majesty's Ships of War should be put under the command of an administrative officer. Each and every Military Hospital is in charge of a commanding officer who is always a Medical Officer in the regular services. Our modern police forces have now been put in charge of experienced policemen and our fire services are in charge of trained firemen. Even the new Social Service Organisation uses qualified Welfare Officers to occupy the chief officer positions as far as possible. When we turn to the Health Services we find that in the 1948 changes most of the hospitals lost their medical superintendents who were all Doctors. Under the new changes in 1974 all the rest disappear. In place there is a lay administrator or a team of administrators responsible to an area board or a regional board of about 15 hand picked lay-men who do not even have the great democratic advantage of being voted into this position. It is reasonable to ask the question why Doctors should be so carefully removed from administrative control in health organisation when in all other similar structures the trained professional is given his common sense place.

The somewhat unpalatable answer lies in the fact that people grow old but do not necessarily grow up, and so far as their attitudes to the medical and nursing professions are concerned, the lay public have not yet advanced beyond a very juvenile stage indeed.

Early in the year the battle over the boundaries of Lincolnshire and Humberside was on, and Lindsey was feverishly engaged in plebiscite and appeals and petitions to M.P's in a desperate effort to retain the highly rated and industrial south bank of the Humber in Lincolnshire. Lindsey's interests unfortunately so far as Scunthorpe was concerned smacked more of an interest in the golden eggs the goose laid than in any long term or evident interest in the welfare of the goose itself. Consequently Scunthorpe showed little or no enthusiasm for supporting Lindsey's efforts. Lindsey's efforts were of little avail and Scunthorpe now moves out of Lincolnshire, probably for ever, into the new county of Humberside.

Last year I noted that the borough and the county were still not on speaking terms so far as Health Matters were concerned, but I am pleased to report that the two Councils settled their differences and are now on speaking terms again. This particular squabble is now a thing of the past and will only be of interest to some future student of the democratic process when investigating how the great British Democratic System faded into a bureaucratic dictatorship. This particular squabble was simply about which of two mutually exclusive statements contained the truth, mine or the County Clerk's. At this point both councils were pleased to seize the shadow for the substance and disagree about a few doubtful swear words rather than concentrate on the essential point of establishing fact from fantasy. It is pleasing to note that the Delegated Health Services are now running in a free and unfettered manner and the borough has had no need to consult the county on anything except the large Health Centres. The report on the site for the South Centre in the section on reports shows how very seriously the county has let down the borough on this subject and how much the failure to obtain the complete site, as agreed has delayed this project. There is now, in my opinion, no hope at all of this centre being built for several years, and I suggest that the

borough and the new Regional Health Board look carefully at the West-cliff area where a considerable amount of new housing is planned and where a Health Clinic was squashed by the County Council several years ago. In this large and populous area demand is high and facilities are at a minimum.

In all good management there is no substitute for placing responsibility clearly and correctly and the compulsory delegation scheme failed because responsibility was divided. In the new local authority changes this delegation is now termed an agency agreement and will be as big a failure as compulsory delegation was for the same reason. It is also likely that in the new local health authority changes there will be similar muddle and failure because the community physician will be asked to serve two masters. The community physician will be appointed by the new health board but will serve the local authority district only if approved by them.

All the usual statistics and figures for the borough are satisfactory and those from the school section show that the school children of the borough have never been healthier than they are now.

The Regional Board has at long last removed the Special Treatment Clinic from Parkinson Avenue Clinic, and the space thus made available has been turned into an Audiology Clinic for the screening of the hearing of young babies.

Finally I wish to thank all the members of the staff of the Borough Health Department for their loyal and efficient work over the years which has built up a service to the people of Scunthorpe which is second to none, and to say that in April, 1974, this Borough will hand over a smoothly working and most effective service which if treated gently will continue to serve the people in the new district until such time as all the changes and alterations which are about to come can be implemented. I can only hope that the new services will improve on those we have, and will hand over, but am very much afraid that a negative phase will set in on 1st April, 1974, which might well last for several years during which the services will decline in this town while the time passes which is required to build up similar services in the other parts of the district to the level at which we hand them over.

S. CHILDS
Medical Officer of Health

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A LOCAL STATISTICAL INFORMATION

STATISTICS SUMMARISED FOR 1972

	<u>Scunthorpe</u>	<u>England</u>
		<u>and Wales</u>
Area of the Borough	7,895 acres	
Population	70,330	
Population Increase	-150	
Number of Inhabited Houses	22,910	
Density of Population per Acre	8.91	
Rateable Value	£5,660,848	
Product of Penny Rate	£56,680	

Live Births:-

Number (a) Legitimate M 469 F 444		
(b) Illegitimate M 50 F 44	1,007	
Rate per 1,000 Population	14.32	14.8
Illegitimate Live Births percent of total Live Births	9.3	9

Stillbirths:-

Number (a) Legitimate M 8 F 5		
(b) Illegitimate M 2 F 2	17	
Rate per 1,000 total Live and Stillbirths	16.60	12
Total Live and Stillbirths	1,024	

Infant Deaths (deaths under 1 year) M 8 F 16 24

Infant Mortality Rates:-

Total Infant Deaths per 1,000 total Live Births	23.83	17
Legitimate Infant Deaths per 1,000 Legitimate Live Births	25.19	17
Illegitimate Infant Deaths per 1,000 Illegitimate Live Births	10.64	21
Neo-Natal Mortality Rate (deaths under 4 weeks per 1,000 live births)	12.91	12
Early Neo-Natal Mortality Rate (deaths under 1 week per 1,000 live births)	8.94	10
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths)	25.39	22
Maternal Mortality (including abortion)		
Number of Deaths	-	111
Rate per 1,000 total live and stillbirths	-	0.15

WEATHER INFORMATION 1972

SUNSHINE

Total Hours for Year	1,195 hrs. recorded
Highest Monthly Figure recorded	189 hrs. August
Sunniest Day Recorded	15 hrs. 17th July

RAINFALL

Total for Year	19.9 inches (497.5 mm)
Number of Wet Days	187
Wettest Month	January 2.5 inches (62.1 mm)
Dryest Month	October 0.4 inches (11.7 mm)

TEMPERATURE - in degrees centigrade

Month	Average Maximum	Average Minimum	Average at 9.00 a.m.
January	5.9	1.6	3.6
February	6.0	2.2	3.5
March	9.9	2.2	4.8
April	11.8	4.9	7.6
May	15.3	5.6	10.9
June	16.7	7.8	12.5
July	19.8	10.7	14.8
August	19.9	10.5	14.8
September	15.7	7.4	10.1
October	14.3	6.4	9.1
November	9.4	3.8	5.6
December	7.5	2.1	4.6

Warmest month	AUGUST
Coldest month	JANUARY
Highest Temperature	AUGUST 23rd- 25°C
Lowest Temperature	JANUARY 31st- 12.8°C
Lowest Grass Temperature	" - 9.0°C
Air Frost recorded on	38 Days
Ground Frost recorded on	77 Days

The Borough does not keep records relating to the incidence of poor visibility owing to fog etc.

NUMBERS REGISTERED AS UNEMPLOYED AT THE SCUNTHORPE OFFICE

OF THE DEPARTMENT OF EMPLOYMENT AND PRODUCTIVITY

The following table gives the monthly average figure of the number of unemployed registered.

	<u>Men</u>	<u>Women</u>	<u>Total</u>
January	1868	620	2488
February	1802	637	2439
March	1592	594	2186
April	1565	682	2247
May	1244	617	1861
June	1240	626	1866
July	1152	672	1824
August	1268	714	1982
September	1328	676	2004
October	1219	474	1693
November	1144	520	1664
December	1212	533	1745

NATIONAL HEALTH INSURANCE - NEW CLAIMS

Monthly Totals

January	-	2609
February	-	2067
March	-	1511
April	-	1405
May	-	1147
June	-	1129
July	-	1500
August	-	1168
September	-	1333
October	-	2051
November	-	1732
December	-	3099

VENEREAL DISEASES

The following table shows the number of persons residing in Scunthorpe who attended the clinic during 1972.

	<u>Males</u>	<u>Females</u>	<u>Total</u>
Syphilis (early)	2	-	2
Syphilis (late)	1	-	1
Gonorrhoea	36	20	56
Other conditions	81	29	110
N.S.G.1	46	2	48
Total			<hr/> <hr/> 217

WOODLANDS CREMATORIUM

	<u>Males</u>	<u>Females</u>	<u>Total</u>
Cremation of people formerly resident in the Borough	291	183	474
Cremation of people formerly non-resident in the Borough	313	169	482
			<u>956</u>

PUBLIC MORTUARY

The Borough owns and maintains a public mortuary sited adjacent to the Police Station and Courts. 146 bodies were received during the year and 137 post-mortem examinations were performed and also 3 post-mortems carried out by the Home Office Pathologist.

COMPARATIVE STATISTICS

YEAR	POPULATION ESTIMATE TO MIDDLE OF EACH YEAR	AREA IN ACRES	DENSITY (PERSONS PER ACRE)	NUMBER OF INHABITED HOUSES	RATE PER 1,000 POPULATION	NUMBER	LIVE BIRTHS RATE PER 1,000	NUMBER	RATE PER 1,000 POPULATION	NUMBER	LIVE BIRTHS RATE PER 1,000	NUMBER	RATE PER 1,000 POPULATION	NUMBER	DEATHS UNDER 1 YR. OF AGE	DEATHS AT ALL AGES	DEATHS FROM NOTIFIED INFECTIOUS DISEASE	DEATHS FROM TUBERCULOSIS	DEATHS FROM CANCER	CANCER DEATH RATE PER 1,000 POPULATION	
1921	27,790	7,961	3.49	5,531	32.60	77	86.00	308	11.00	391	31	45.00	268	8.20	79	18	647	.647			
1926	32,820	7,961	4.12	6,457	20.60	51	83.00	349	10.20	431	51	83.00	360	9.20	81	30	914	.914			
1931	33,990	7,895	4.30	7,548	18.10	51												1,000	1.000		
1936	38,740	7,895	4.90	9,970	712	18.30	40	56.10	377	43.07	37	43.07	408	8.90	1,082	37	959	.959			
1941	45,840	7,895	5.80	12,450	855	18.65	30	29.73	424	8.66	30	29.73	425	8.66	77	44	1,429	1.429			
1946	48,960	7,895	6.20	12,558	1,009	20.60	28	27.18	474	8.77	28	27.18	475	8.77	2,054	49	61	1.129			
1951	54,050	7,895	6.84	15,081	1,030	19.06	1,030	18.60	496	8.44	1,030	18.60	497	8.44	1,215	28	70	1.191			
1956	58,760	7,895	7.44	17,999	1,093	18.60	1,093	18.60	591	8.85	1,093	18.60	592	8.85	1,391	16	102	1.527			
1961	66,970	7,895	8.46	20,153	1,351	20.23	1,351	20.23	591	8.85	1,351	20.23	592	8.85	1,391	16	95	1.394			
1962	68,130	7,895	8.63	20,450	1,445	21.21	1,445	21.21	570	8.37	21.21	21.21	571	8.37	447	23	23	1.394			
1963	68,890	7,895	8.73	20,899	1,368	19.86	1,368	19.86	570	8.37	19.86	19.86	571	8.37	447	23	21	1.394			
1964	69,600	7,895	8.82	21,082	1,463	21.02	1,463	21.02	572	8.22	21.02	21.02	573	8.22	447	23	21	1.394			
1965	70,180	7,895	8.89	21,559	1,360	19.38	21,559	19.38	572	8.22	19.38	19.38	573	8.22	447	23	21	1.394			
1966	70,980	7,895	8.99	22,048	1,331	18.75	22,048	18.75	572	8.22	18.75	18.75	573	8.22	447	23	21	1.394			
1967	71,010	7,895	8.99	22,097	1,277	17.98	22,097	17.98	572	8.22	17.98	17.98	573	8.22	447	23	21	1.394			
1968	69,760	7,895	8.84	22,099	1,320	18.92	22,099	18.92	572	8.22	18.92	18.92	573	8.22	447	23	21	1.394			
1969	69,720	7,895	8.83	22,292	1,294	18.56	22,292	18.56	572	8.22	18.56	18.56	573	8.22	447	23	21	1.394			
1970	69,660	7,895	8.82	22,644	1,172	16.8	22,644	16.8	572	8.22	16.8	16.8	573	8.22	447	23	21	1.394			
1971	70,480	7,895	8.93	22,787	1,175	16.7	22,787	16.7	572	8.22	16.7	16.7	573	8.22	447	23	21	1.394			
1972	70,330	7,895	8.91	22,910	1,007	14.32	22,910	14.32	572	8.22	14.32	14.32	573	8.22	447	23	21	1.394			

POPULATION OF THE BOROUGH

The Registrar General's estimate of the mid-year population of Scunthorpe Borough in 1972 was 70,330, a decrease of 150 from his mid-year estimate for 1971. As the natural increase in population between 1971 and 1972 was 300, this being the difference between the number of births and the number of deaths during the year, it is clear that the Registrar General has estimated that 450 people have left the Borough area during 1972.

The birth rate of the Borough, that is the number of live births for 1,000 population, fell remarkably during the year, from 16.67 in 1971 to 14.32 in 1972. For the first time the Registrar General's comparability figure, which makes allowance for any difference in the proportion of women of child bearing age in the local population from that of England and Wales as a whole, was above unity, indicating that the proportion of younger women in Scunthorpe is no longer higher than the average elsewhere, but when this correction is made, and the standardised birth rate obtained, it is found that this is still below that of the country as a whole, for the first time in the history of the Borough.

The lower recorded birth rate and a higher recorded death rate together render the natural increase in the population during 1972, 300 persons, the lowest since 1934, when the population was only about half what it is now. The 40% fall in the natural increase from 503 in 1971 to 300 in 1972 might be termed precipitous, but it is exactly in keeping with the trend in England and Wales as a whole, where the natural increase was 216 thousand in 1971, but only 131 thousand in 1972.

The illegitimate birth rate, the number of illegitimate live births for 1,000 live births, rose from 8.1 in 1971 to 9.3 in 1972, continuing to remain a little higher than that of the rest of the country, which increased from 8 in 1971 to nearly 9 in 1972.

BIRTHS IN THE BOROUGH OF SCUNTHORPE

Year	Total Births	Recorded Birth Rate	Registrar-General's Comparability Factor	Standardised Birth Rate	Rate per 1,000 England and Wales	Ratio of Local Adjusted Birth Rate to National Rate
1956	1,093	18.60	0.94	17.48	15.7	1.11
1957	1,154	19.39	0.93	18.04	16.1	1.12
1958	1,164	19.18	0.93	17.84	16.4	1.09
1959	1,236	19.99	0.93	18.59	16.5	1.13
1960	1,288	20.42	0.93	18.99	17.1	1.11
1961	1,351	20.23	0.91	18.41	17.4	1.06
1962	1,445	21.21	0.91	19.30	18.0	1.07
1963	1,368	19.68	0.97	19.23	18.2	1.06
1964	1,463	21.02	0.97	20.39	18.4	1.10
1965	1,360	19.38	0.97	18.8	18.0	1.05
1966	1,331	18.75	0.97	18.19	17.7	1.03
1967	1,277	17.98	0.97	17.44	17.2	1.02
1968	1,320	18.92	0.97	18.3	16.9	1.08
1969	1,294	18.56	0.97	18.0	16.3	1.11
1970	1,172	16.82	0.97	16.3	16.0	1.02
1971	1,175	16.67	0.97	16.16	16.0	1.01
1972	1,007	14.32	1.02	14.61	14.8	0.99

VITAL STATISTICS, 1921 - 1972

Year	Population	Increase of Population over previous year	No. of live births	No. of deaths	Natural increase (births-deaths)	Migratory increase
1921	27,790	-	-	-	-	-
1922	28,530	740	729	278	451	289
1923	29,420	890	725	293	432	458
1924	30,970	1,550	786	324	462	1,088
1925	31,430	460	743	274	469	-9
1926	32,820	1,390	678	268	410	920
1927	33,050	230	606	321	285	-55
1928	31,660	-1,390	648	238	410	-1,800
1929	31,880	220	651	350	301	-81
1930	31,880	0	732	327	405	-405
1931	33,990	2,110	616	349	267	1,843
1932	34,190	200	591	325	266	-66
1933	34,590	400	553	359	194	206
1934	35,710	1,120	591	320	271	849
1935	37,710	2,000	750	340	410	1,590
1936	38,740	1,030	712	360	352	678
1937	40,270	1,530	812	394	418	1,112
1938	42,000	1,730	853	404	449	1,281
1939	43,940	1,640	923	388	535	1,405
1940	45,680	1,740	908	437	471	1,269
1941	45,840	160	855	408	447	-287
1942	44,990	-850	882	391	491	-1,341
1943	44,830	-160	970	389	581	-741
1944	45,750	920	1,098	395	703	217
1945	46,010	260	968	404	564	-304
1946	48,960	2,950	1,009	424	585	2,365
1947	50,220	1,260	1,163	415	748	512
1948	51,100	880	1,068	431	657	223
1949	52,030	930	1,022	445	577	353
1950	54,090	2,060	1,008	444	564	1,496
1951	54,030	-60	1,030	474	556	-616
1952	54,930	900	1,039	422	617	283
1953	55,850	920	1,060	484	576	344
1954	56,520	670	1,042	503	539	131
1955	57,440	920	997	468	529	391
1956	58,760	1,320	1,093	496	597	723
1957	59,490	730	1,154	517	637	93
1958	60,700	1,210	1,164	554	610	600
1959	61,840	1,140	1,236	517	719	421
1960	63,090	1,250	1,288	545	743	507
1961	66,790	3,700	1,351	591	760	2,940
1962	68,130	1,340	1,445	570	875	465
1963	68,890	760	1,368	592	776	-16
1964	69,600	710	1,463	572	891	-181
1965	70,180	580	1,360	624	736	-156
1966	70,980	600	1,331	610	721	-79
1967	71,010	30	1,277	607	670	-640
1968	69,760	-1,250	1,320	651	669	-1,919
1969	69,720	-40	1,294	649	645	-685
1970	69,660	-60	1,172	672	500	-560
1971	70,480	820	1,175	672	503	317
1972	70,330	-150	1,007	707	300	-450

DEATHS

Seven hundred and seven deaths occurred amongst Scunthorpe citizens during 1972, giving a recorded death rate of 10.05 deaths per 1,000 population, the highest since 1933. It is quite natural and inevitable that Scunthorpe's recorded death rate should be rising steadily at the present stage of the development of the town. While Scunthorpe's population was expanding, the average age of the people entering the town was below the average age of the population at large and this gave Scunthorpe a 'young' population, with a low proportion of people in the higher age groups where the death rate is greatest.

As time passes, with the growth rate remaining stationary, the individuals that formed the youthful majority of citizens become older, and the distribution of the population between the various age groups becomes more typical of the country as a whole. Thus the Registrar General's comparability factor, which is a measure of the size of this variation from the national average, becomes smaller. This was highest in 1961 and 1962 at 1.56, and has since fallen to 1.32.

When the standardised death rate is obtained by multiplying the recorded death rate by the comparability factor, Scunthorpe's standardised death rate is found to be the lowest for five years, at 13.27 per 1,000. When the ratio of the local standardised rate to that of the national rate is obtained - and this is the 'key' figure showing how things stand in Scunthorpe compared with conditions in England and Wales as a whole - it is found to have improved considerably from 1.2 in 1971 to 1.1 in 1972, actually a 9.2% improvement, but this is the ratio by which life in Scunthorpe is unhealthier than in the country as a whole.

The usual preponderance of male deaths occurred in 1972, 57% of all deaths being those of males, compared with 56% in 1971. Though there was an improvement in the average age of death for both sexes, the tendency for male deaths to occur earlier than female deaths was maintained. 40% of all male deaths occurred before age 65 in 1972, compared with 45% in 1971, but only 26% of female deaths in 1972, and 32% in 1971, occurred before age 65. 26% of male deaths in 1972 (27% in 1971) took place at 75 years old or more, compared with 40% of female deaths in 1972 (43% in 1971). 18% of the females who died in 1972 had reached age 85 at least (17% in 1971) but only 6% of the males, the same proportion as in 1971. One lady had completed her century, making 1972 the third year in succession with the death of a centenarian.

As usual, "Ischaemic Heart Disease" was the most frequent individual cause of death in the Registrar General's categories, causing 28% of all deaths, 29% of all male deaths and 27% of all female deaths. The next most important single cause was "Cerebrovascular Disease", which caused 15% of all deaths, 12% of male deaths and 18% of female deaths. For males the more important individual causes thereafter were "Lung Cancer", with 7% of all male deaths, "Bronchitis and Emphysema", also causing 7% of all male deaths, and "Other Diseases of the Circulatory System", with 5%.

For females "Pneumonia" and "Other Malignant Neoplasms", both causing 6% of all female deaths, were the next most important causes.

If the Registrar General's individual causes are grouped under more general headings Heart Disease, with 234 deaths, is, as usual, the largest group, followed by Cancer, 132 deaths, Strokes, 105 deaths, and Respiratory Diseases, 75 deaths, in their usual order.

The number of fatal accidents amongst citizens of the Borough rose from 29 in 1971 to 37 in 1972, mostly due to an increase in the number of fatal road accidents. There were five cases of suicide in 1972, compared with two in 1971, one case of infanticide and one case of homicide.

DEATHS IN THE BOROUGH OF SCUNTHORPE

Year	Total Deaths	Recorded Death Rate	Registrar-General's Comparability Factor	Standardised Death Rate	Rate per 1,000 (England and Wales)	Ratio of Local Adjusted Death Rate to National Rate
1955	468	8.15	1.36	11.08	11.7	0.95
1956	496	8.44	1.48	12.49	11.7	1.07
1957	517	8.69	1.49	12.95	11.5	1.13
1958	554	9.13	1.49	13.60	11.7	1.16
1959	517	8.36	1.49	12.46	11.6	1.07
1960	545	8.64	1.49	12.87	11.5	1.12
1961	591	8.85	1.56	13.81	12.0	1.15
1962	570	8.37	1.56	13.06	11.9	1.10
1963	592	8.59	1.51	12.97	12.2	1.06
1964	572	8.22	1.51	12.41	11.3	1.10
1965	624	8.89	1.48	13.16	11.5	1.14
1966	610	8.59	1.49	12.80	11.7	1.09
1967	607	8.55	1.47	12.57	11.2	1.12
1968	651	9.33	1.48	13.81	11.9	1.16
1969	649	9.31	1.46	13.59	11.9	1.14
1970	672	9.65	1.46	13.99	11.7	1.20
1971	672	9.52	1.46	13.93	11.6	1.20
1972	707	10.05	1.32	13.27	12.1	1.10

REGISTRATION OF MORTALITY FIGURES FOR
CENSUS OF DEATH DURING 1972

<u>Cause Number</u>		<u>Males</u>	<u>Females</u>	<u>Total</u>
B4	Infectis and Other Diarrhoeal Diseases	1	-	1
B5	Tuberculosis of Respiratory System	2	1	3
B6(2)	Other Tuberculosis	-	1	1
B18	Other Infective and Parasitic Diseases	1	-	1
B19(1)	Malignant Neoplasm, Buccal Cavity etc.	2	-	2
B19(2)	Malignant Neoplasm, Oesophagus	1	1	2
B19(3)	Malignant Neoplasm, Stomach	9	-	9
B19(4)	Malignant Neoplasm, Intestine	12	15	27
B19(6)	Malignant Neoplasm, Lung, Bronchus	30	6	36
B19(7)	Malignant Neoplasm, Breast	-	3	3
B19(8)	Malignant Neoplasm, Uterus	-	10	10
B19(9)	Malignant Neoplasm, Prostate	4	-	4
B19(10)	Leukaemia	1	1	2
B19(11)	Other Malignant Neoplasms	17	17	34
B20	Benign and Unspecified Neoplasms	1	-	1
B21	Diabetes Mellitus	1	3	4
B22	Aminoacidos etc.	1	-	1
B23	Anaemias	-	2	2
B46	Mental Disorders	1	-	1
B46(5)	Other Diseases of Nervous System	7	2	9
B26	Chronic Rheumatic Heart Disease	3	1	4
B27	Hypertensive Disease	7	3	10
B28	Ischaemic Heart Disease	118	82	200
B29	Other Forms of Heart Disease	16	14	30
B30	Cerebrovascular Disease	50	55	106
B46(6)	Other Diseases of Circulatory System	19	13	32
B32	Pneumonia	17	18	35
B33(1)	Bronchitis and Emphysema	30	8	38
B33(2)	Asthma	1	1	2
B46(7)	Other Diseases of Respiratory System	-	1	1
B34	Peptic Ulcer	1	4	5
B36	Intestinal Obstruction and Hernia	2	1	3
B37	Cirrhosis of liver	1	1	2
B46(8)	Other Diseases of Digestive System	4	2	6
B38	Nephritis and Nephrosis	5	1	6
B46(9)	Other Diseases Genita Urinary System	2	-	2
B46(11)	Diseases of Musculo- Skeletal System	-	1	1
B42	Congenital Anomalies	3	4	7
M5	Birth Injury, Difficult Labour, etc.	2	4	6
B44	Other Causes of Perinatal Mortality	-	1	1
B45	Symptoms and Ill Defined Conditions	2	6	8
B307	Motor Vehicle accidents	11	7	18
B343	All Other Accidents	12	7	19
B349	Suicide and Self-Inflicted Injuries	3	2	5
B350	All Other External Causes	1	1	2
Total	401	305	707	

AGE AND SEX DISTRIBUTION OF CAUSES OF DEATH BY REGISTRAR GENERAL RETURNS OF 50 GROUPS 1972

Cause Number	0 - 4 m.	0 - 4 f.	5 - 14 m.	5 - 14 f.	15 - 24 m.	15 - 24 f.	25 - 34 m.	25 - 34 f.	35 - 44 m.	35 - 44 f.	45 - 54 m.	45 - 54 f.	55 - 64 m.	55 - 64 f.	65 - 74 m.	65 - 74 f.	75 - 84 m.	75 - 84 f.	85 - 94 m.	85 - 94 f.	95+ m.	95+ f.	Total m.	Total f.
3.4	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
3.5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	1
3.6(2)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.18	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-
B.19(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.19(2)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.19(3)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.19(4)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.19(5)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.19(6)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.19(7)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.19(8)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.19(9)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.19(10)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.19(11)	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.20	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.21	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.22	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.23	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.46(9)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.46(11)	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.26	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.27	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
B.28	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-

Cont'd

AGE AND SEX DISTRIBUTION OF CAUSES OF DEATH BY REGISTRAR GENERAL RETURNS OF 50 GROUPS 1972 (Cont'd)

Cause Number	0 - 4		5 - 14		15 - 24		25 - 34		35 - 44		45 - 54		55 - 64		65 - 74		75 - 84		85 - 94		95+		Total	
	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.		
B.29	-	-	-	-	-	-	-	-	1	-	1	-	4	2	6	4	2	3	2	-	2	16	14	
B.30	-	-	-	-	-	-	-	-	1	-	1	-	8	6	21	15	14	22	4	12	1	-	50	56
B.45(6)	-	-	-	-	-	-	-	-	-	-	1	-	1	4	1	4	6	4	6	4	-	19	13	
B.32	-	-	1	-	-	-	-	-	-	-	1	-	1	4	1	6	2	8	6	1	7	-	17	
B.33(1)	-	-	-	-	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	18	
B.33(2)	-	-	-	-	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	30	
B.40(7)	-	-	-	-	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.34	-	-	-	-	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.36	-	-	-	-	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.37	-	-	-	-	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.45(8)	-	-	-	-	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.32	-	-	-	-	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.45(9)	-	-	-	-	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.45(11)	-	-	-	-	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.42	-	-	3	-	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.43	-	-	2	4	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.44	-	-	1	4	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.45	-	-	1	5	-	-	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.47	-	-	1	4	3	1	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.48	-	-	2	5	1	3	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.49	-	-	1	4	3	1	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
B.50	-	-	1	5	1	3	-	-	-	-	1	-	1	9	1	12	3	8	4	-	-	-	1	
	12	17	-	-	6	4	2	1	16	9	42	15	82	45	135	69	80	94	24	46	2	6	401	306

INFANT DEATHS

Twenty four infants less than one year old died during 1972, in which year 1,007 live births occurred in Scunthorpe. This gives an infant mortality rate of 23.83 deaths per 1,000 live births, a disappointing number compared with that of 19.57 for 1971, and one that widens the gap between the infant mortality rate of Scunthorpe and that of the country as a whole, which declined from 17.5 in 1971 to 17.3 in 1972.

When the deaths below one year are analysed into various components in accordance with the ages at which the deaths occurred it is found that the early neo-natal mortality rate, that is deaths occurring in the first week of life per 1,000 live births, was lower in Scunthorpe in 1972, at 8.94, than it was in the rest of the country at 10. It would appear that whatever adverse conditions are operating in Scunthorpe with regard to infant health, these factors show no effect during the first week of life. When the neo-natal mortality rate is considered, i.e. deaths during the first four weeks of life, it is found that the figure for Scunthorpe, at 12.91 is higher than that of the rest of the country, 12, so that the adverse factors, whatever they are, begin to produce an effect between the end of the first and the beginning of the fifth week of life, and this effect continues and indeed increases, during the whole of the first year of life.

During the first weeks of life the main causes of death are prematurity, respiratory distress syndrome and congenital malformations, and if these almost inevitable conditions alone are considered, the position in Scunthorpe for the first four weeks is quite satisfactory compared with England and Wales as a whole. It is only because of a case of "want of attention at birth" - this concerns the body of a live born infant found at the refuse disposal centre, of whom nothing else is known - and an accidental death in the third week of life, that the neo-natal mortality is higher in Scunthorpe than elsewhere and it is mainly due to the five accidental deaths occurring between the end of the first four weeks of life and one year old, out of the total of eleven deaths occurring during this period, that the infant mortality rate for Scunthorpe is so far above that of the country as a whole. If the six accidental or 'cot' deaths which occurred during 1972 could have been avoided, Scunthorpe's figures for infant mortality would have been very similar to those of the country as a whole, and if, in addition, the case of neglect and a case of infanticide could have been avoided, the infant mortality rate in Scunthorpe would have been comfortably below that of England and Wales. It would thus appear, from the limited figures available, that the standard of the obstetrical services in Scunthorpe, and the standard of the general practitioner and hospital services in the treatment of children in Scunthorpe, are satisfactory when compared with those of the country as a whole. The question of 'cot' deaths and their prevention has been extensively researched in recent years, to try to find an infective factor in their causation. No such factor has so far been discovered, and no such factor is discernible in the six cot deaths in Scunthorpe in 1972. These cot deaths constituted a quarter of the total deaths below one year old, an unusually high proportion. The task of the future would appear to be to improve the standard of infant care in the homes by increasing use of Health Visitors in their capacity as domestic advisers.

The combination of the early neo-natal and the stillbirth rate, considered as a ratio of the total live and still births during the year, gives the perinatal mortality rate, which, for Scunthorpe in 1972, was 25.39, a disappointing and inexplicable 50% increase over the 16.87 recorded in 1971. As it is still the third lowest figure ever recorded for Scunthorpe, however, this merely means that the figure for 1971 was inexplicably low.

INFANT MORTALITY

The Infant Mortality Rate is the number of babies under one year old who died during the year, related to the number of live births in the same year. This year twenty four infants died, giving a mortality rate of 23.83.

Sixteen deaths occurred in hospital, ten in Scunthorpe General Hospital, two in the Hull Royal Infirmary, two in Northern General Hospital Sheffield, and one each in Broomhills Hospital Sheffield, and Brumby Hospital, Scunthorpe. Seven children died at home. In the case of the last infant, the live-born infant found dead at the Refuse Collection Depot, the place of death is not known.

<u>Year</u>	<u>Actual No.</u>	<u>Scunthorpe Rate</u>	<u>England and Wales Rate</u>
1956	29	26.53	23.8
1957	28	24.56	23.1
1958	30	25.77	22.5
1959	32	25.89	22.2
1960	28	21.74	21.8
1961	38	28.13	21.4
1962	37	25.61	21.7
1963	35	25.58	21.1
1964	33	22.56	19.9
1965	38	27.94	19.0
1966	30	22.54	19.0
1967	30	23.49	18.3
1968	27	20.45	18.3
1969	30	23.18	18.0
1970	24	20.48	18.2
1971	23	19.57	17.5
1972	24	23.83	17.3

NEONATAL MORTALITY

The Neonatal Mortality Rate is the number of babies four weeks of age and under who died during the year related to the number of live births in the same year. This year, thirteen babies in this age group died, nine in the first seven days of life.

<u>Year</u>	<u>Actual No.</u>	<u>Scunthorpe</u>	<u>England and Wales</u>
		<u>Rate</u>	<u>Rate</u>
1956	22	20.12	16.8
1957	18	15.59	16.5
1958	22	18.90	16.2
1959	32	16.18	15.9
1960	28	12.42	15.5
1961	25	16.28	15.3
1962	28	19.38	15.1
1963	22	16.08	14.3
1964	21	14.35	13.8
1965	27	19.85	13.0
1966	19	14.27	12.9
1967	17	13.31	12.5
1968	15	11.36	12.3
1969	24	18.55	12.0
1970	15	12.80	12.0
1971	13	11.07	12.0
1972	13	12.91	12.0

PERINATAL MORTALITY

This is the ratio of the number of deaths in the first week of life, plus the number of still births, to the total number of live and stillbirths expressed as the number per thousand total births.

<u>Year</u>	<u>England & Wales</u>	<u>Scunthorpe</u>	<u>Still-Births</u>	<u>Total Perinatal Deaths</u>	<u>Under 1 Week</u>
1956	36.7	43.9	30	48	18
1957	36.2	46.7	37	54	17
1958	35.8	36.2	24	43	19
1959	34.1	38.7	29	49	20
1960	32.8	38.5	35	51	16
1961	32.6	46.6	43	65	22
1962	30.8	40.5	34	60	26
1963	29.3	35.1	30	49	19
1964	28.2	23.55	23	35	12
1965	26.9	33.96	24	47	23
1966	26.3	34.56	29	47	18
1967	25.4	25.42	21	33	12
1968	24.7	30.42	28	41	13
1969	23.4	31.89	23	42	19
1970	23.5	29.34	21	35	14
1971	22.0	16.87	10	20	10
1972	22.0	25.39	17	26	9

CAUSES OF INFANT DEATHS

CAUSE OF DEATH	SEX	Under 1 day	1-7 days	Total under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	1-3 months	4-6 months	7-9 months	10-12 months	Total under 1 year	Maternity	Hospital	Home	Coroner	Place of Birth
Prematurity	M	-	2	2	2	1	-	-	-	-	-	-	-	-	-	-	-	-
Neo-natal asphyxia without prematurity	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Want of attention at birth	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Congenital malformations	M	1	-	1	1	1	-	2	1	-	-	-	3	-	3	-	-	-
Accident	M	-	1	1	-	-	-	2	1	-	-	-	4	-	4	-	-	-
Gastroenteritis	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Infanticide	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Bronchopneumonia	M	1	2	3	2	6	-	5	1	-	8	5	1	1	8	-	6	3
TOTAL	M	1	2	3	1	2	-	5	1	-	8	5	2	1	1	-	10	10
	F	4	2	6	4	6	-	8	5	-	16	-	-	-	-	-	5	10

STILL BIRTHS 1972

<u>Cause</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Diseases and conditions of pregnancy and childbirth	2	-	2
Placental and cord conditions	5	2	7
Congenital malformation of foetus	2	2	4
Birth injury	-	1	1
Other and ill defined causes	1	2	3
	10	7	17

STILLBIRTHS 1972 TABLE 2

Number in Register	Week ending	Mothers Age	Gravida	Sex	Weight	Place Born		Cause
						Insti-tution	Domici-liary	
36	12.2.71	23	5	M	2.370	1	-	Intra uterine death pre eclamptic toxæmia
7	31.3.72	24	4	M	2.600	1	-	Intra uterine death, placental insufficiency
9	31.3.72	34	7	M	1.700	1	-	Anoxia foetal abnormality
39	13.5.72	36	4	M	3.000	1	-	Anencephalus
11	30.6.72	20	1	2nd twin	1.675	1	-	Intra uterine death foetal anoxia
								Anoxia, Abruptio placenta
								Accidental haemorrhage
								Maternal pre eclamptic toxæmia
								Hydrocephalus
								Anencephalus & Spina-bifida
								Placental insufficiency
								Intra uterine anoxia
								Torn tentorium
								Hydrocephaly
								Macerated stillbirth due to
								pre eclamptic toxæmia
								Intra uterine anoxia
								Intra uterine death due to
								cord compression
								Intra uterine asphyxia
								abruptio placenta
								Intra uterine anoxia, cord compression

CONGENITAL DEFECTS

As from 1st January, 1964, it has been obligatory for Medical Officers of Health to notify the General Register Officer of all congenital malformations occurring in the births, both live and still, reported in their areas. When these returns are statistically examined by computer any change in the usual pattern of incidence is detected, and a cause for this change may be looked for. Thus the existence of any teratogenic factor operating in the community will be detected as quickly as possible. In 1972 twenty six such cases of congenital malformations were reported, compared with twenty five in 1971.

<u>Congenital Malformations</u>	<u>Number Detected</u>	<u>Number Detected</u>
	<u>At Birth</u>	<u>After Birth</u>
Anencephalus	2	-
Hydrocephalus	2	-
Spina Bifida	2	-
Imperforated Anus	1	-
Congenital heart disease (unspecified)	-	4
Unspecified malformations of		
respiratory system	-	1
Malformations of diaphragm	-	1
Hypospadias	1	1
Undescended testicle	1	-
Syndactyly	1	-
Talipes	4	-
Malformations of skull or face bones	1	-
Other malformations of musculo-skeletal		
system	1	-
Other unspecified malformations of muscles,		
skin and fascia	1	-
Multiple congenital malformations not		
specified	1	-
Down's syndrome (mongolism)	-	1

CASES OF MALFORMATIONS NOTIFIED 1972

No.	Congenital Malformation	Number detected		Date of Birth	Live or SB	Sex	Mother's Age	Gravida	Total
		At Birth	After Birth						
6/72	Anencephalic	1	-	8.3.72	SB	M	34	7	6
8/72	Anencephalic/Spina Bifida	1	-	16.4.72	SB	F	30	4	1
10/72	Hydrocephalic	1	-	3.5.72	L	M	36	4	
21/72	Hydrocephalic	1	-	13.9.72	SB	M	23	1	
9/72	Spina Bifida, Hydrocephalic/talipes	1	-	16.4.72	SB	M	18	1	4
17/72	Spina Bifida, Hydrocephalic	1	-	20.7.72	SB	F	21	2	
2/72	Imperforated Anus	1	-	13.1.72	L	M	18	1	
11/72	Congenital Heart defect	-	1	15.4.72	L	F	16	1	
13/72	Congenital Heart defect	-	1	23.5.72	L	M	24	3	
16/72	Unspec. Heart disease	-	1	26.6.72	L	N	32	4	
26/72	Congenital Heart disease	-	1	22.11.72	L	F	18	1	
18/72	Congenital Pulmonary disease	-	1	15.6.72	L	M	22	1	
14/72	Hole in Diaphragm	-	1	18.4.72	L	M	23	3	2
12/72	Undescended testicles	1	-	18.5.72	L	M	25	2	
20/72	Hypo spadias	1	-	6.9.72	L	M	20	2	
25/72	Hypo spadias	-	1	18.5.72	L	M	28	2	
5/72	Syndactyly	1	-	5.3.72	L	M	25	1	
1/72	Talipes-mild Rt. foot	1	-	4.1.72	L	F	20	1	
4/72	Talipes-L. Calcaneo valgus	1	-	26.2.72	L	F	31	1	
22/72	Talipes-Rt. foot	1	-	25.9.72	L	F	17	1	
24/72	Talipes-Lt. foot	1	-	1.11.72	L	F	29	2	
3/72	Pilonidal sinus	1	-	5.2.72	L	F	24	5	
23/72	Sutures Wide apart base of spine	1	-	28.10.72	L	F	23	1	
19/72	Small tuft of hair - Mongoloid features	1	-	31.8.72	L	F	20	2	
7/72	Multiple congenital malformations	1	-	25.2.72	L	F	42	7	1
15/72			-	8.7.72	L	M	19	1	2

CANCER

One hundred and thirty two deaths occurred from cancer in 1972. Only once before, in 1968, when 140 deaths from cancer occurred, has the number been greater. The number of lung cancer deaths shows an increase from 1971, but the sex proportion, 30 male deaths to 6 female deaths is representative of the country as a whole. The deaths due to breast cancer are down, but the deaths due to uterine carcinoma are up. The Cancer and Breast Screening Service has prevented some deaths in both categories, but it is clear that insufficient use is being made of this service by Scunthorpe women.

Age and Sex Distribution of Deaths from Cancer

Age	Malignant Neoplasm Stomach		Malignant Neoplasm, Lung		Malignant Neoplasm		Other Malignant & Lymphatic Neoplasms	Total	
	M	F	M	F	Breast	Uterus		M	F
0-24	-	-	-	-	-	-	1	-	1
25-34	-	-	-	-	-	-	-	1	-
35-44	-	-	-	-	-	1	2	2	2
45-54	-	-	5	-	-	2	2	5	10
55-64	4	-	7	3	-	4	3	5	17
65-75	5	-	14	3	-	-	1	15	10
75+	-	-	4	-	-	1	2	8	12
Total	9	-	30	6	-	8	10	36	33
								75	57

CANCER

Year	Malignant Neoplasm Lung Bronchus	Malignant Neoplasm Breast	Malignant Neoplasm Stomach	Malignant Neoplasm Uterus	Other Malignant & Lymphatic Neoplasms	Total	Population of Scunthorpe	Cancer Fatality Rate per 1,000 Population	Number of Deaths from all causes	% of Deaths due to Cancer
1956	20	1	10	3	36	70	58,760	1.19	496	14.11
1957	24	7	15	4	50	100	59,490	1.68	517	19.31
1958	23	2	11	2	69	107	60,000	1.76	554	19.21
1959	22	11	14	5	44	96	61,840	1.55	517	18.57
1960	31	7	9	6	43	101	63,090	1.60	545	18.53
1961	25	4	10	3	60	102	66,790	1.52	591	17.26
1962	26	8	13	6	42	95	68,130	1.39	570	16.67
1963	29	10	13	2	58	112	68,390	1.62	592	18.75
1964	21	10	18	8	58	115	69,600	1.65	572	20.10
1965	30	16	18	1	48	113	70,180	1.61	624	18.11
1966	25	9	16	4	67	121	70,980	1.70	610	19.84
1967	38	9	11	7	66	131	71,010	1.84	607	21.58
1968	42	8	17	2	71	140	69,760	2.01	651	21.51
1969	29	11	6	5	62	113	69,720	1.62	649	17.41
1970	39	14	8	3	67	131	69,660	1.88	672	19.49
1971	26	17	7	2	71	123	70,480	1.75	672	18.30
1972	36	8	10	9	69	132	70,330	1.88	707	18.67

Infectious Diseases

Including tuberculosis, 366 cases of infectious disease were notified to the Health Department during 1972, compared with 316 cases in 1971. Cases of notifiable infectious diseases discovered during the investigation of the notified cases, and cases of non-notifiable infectious disease brought the total of known cases of infectious disease in 1972 to 1156, compared with 768 in 1971.

The small number of cases of measles recorded for the second year in succession is particularly pleasing, as it hints that the tendency of measles to occur in epidemic proportions every second year has been broken by the campaign of immunization against this malady. Amongst notifiable diseases the only ones that show an increase are dysentery, respiratory tuberculosis and infectious hepatitis, and in the first two cases the numbers are only slightly worse than the figures for 1971. But the great increase in the number of cases of infectious hepatitis is disquieting, especially as one death ensued, the only death to occur from "Other infective and parasitic diseases". Infectious hepatitis shares with dysentery 'the characteristics' of (1) being endemic in Scunthorpe at all seasons (2) effecting almost all age groups and (3) being dependent on its spread on defective personal hygiene, though it is not, of course, only those people whose hygienic habits are defective that are affected by it.

Amongst non-notifiable diseases the increase in the number of cases of mumps was the most noticeable feature; but the smaller increase in the number of cases of scabies is possibly more significant of an unsatisfactory and preventible state of defective hygiene in too many homes.

10 cases of food poisoning occurred during the year, three in association with each other and seven separately. In only 4 cases could the causative organism be identified, and in all four cases it was shigella sonnei.

NOTIFIED INFECTIOUS DISEASES (Corrected) 1962 - 1972

	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971	1972
Scarlet Fever	7	40	23	12	5	34	43	92	21	15	7
Whooping Cough	15	123	80	3	35	161	31	4	76	47	1
Measles	271	1224	497	1083	1318	372	700	81	1511	46	43
Acute Poliomyelitis:-											
Paralytic	-	-	-	-	-	-	-	-	-	-	-
Non-paralytic	-	-	-	-	-	-	-	-	-	-	-
Encephalitis	2	-	-	-	-	-	2	-	-	1	-
Dysentery	134	117	209	316	117	167	310	316	243	150	174
Food Poisoning	6	48	9	5	7	7	13	17	7	20	10
Meningitis	1	6	7	3	6	5	1	3	9	6	3
Malaria	1	-	1	-	-	1	-	-	-	-	-
Typhoid	-	-	-	-	-	-	-	-	1	-	-
Respiratory Tuberculosis	21	18	13	18	16	19	7	9	11	4	7
Non-respiratory Tuberculosis	2	3	4	2	-	4	-	2	3	3	-
Infective Hepatitis	-	-	-	41	74	43	14	81	103	25	121

NOTIFIED INFECTIOUS DISEASES 1972 (corrected in cases of revised diagnosis)

		Under 1 year						
		1 year						
		2 years						
		3 years						
		4 years						
		5 - 9						
		10 - 14						
		15 - 24						
		25 & over						
		Age Unknown						
		Total						
Measles	-	6	3	6	7	21	-	-
Dysentery	10	26	15	13	7	17	6	23
Whooping Cough	-	-	-	-	-	1	-	-
Scarlet Fever	-	-	2	-	1	2	1	-
Food Poisoning	1	-	-	1	1	1	-	3
Infective Hepatitis	-	-	2	3	5	50	29	16
Respiratory T.B.	-	-	-	-	-	1	1	5
Non-respiratory T.B.	-	-	-	-	-	-	-	-
Meningitis	1	-	-	-	1	1	-	-
Encephalitis	-	-	-	-	-	-	-	-
Typhoid	-	-	-	-	-	-	-	-
Total	12	32	22	23	22	92	38	43
						75	7	366

TOTAL MONTHLY INCIDENCE OF ALL KNOWN CASES OF INFECTIOUS DISEASES 1972

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Scarlet Fever	1	-	5	3	1	1	-	1	-	1	1	1	15
Whooping Cough	1	2	-	-	1	-	-	-	-	-	-	-	4
Measles	-	6	-	1	-	3	6	28	2	1	2	7	56
Dysentery	6	14	18	8	21	28	18	24	14	17	16	15	199
Gastro Enteritis	2	2	-	-	5	5	4	1	-	4	2	1	26
Chicken Pox	5	47	57	18	60	13	6	-	1	2	7	-	216
Mumps	13	23	31	2	3	9	14	-	10	26	29	36	196
Food Poisoning	3	-	2	1	2	2	-	-	-	-	-	-	10
Meningococcal Meningitis	-	1	1	1	-	-	-	-	1	-	-	-	4
Scabies	7	8	8	3	-	1	-	-	-	-	2	-	29
Impetigo	1	1	1	-	-	2	-	-	-	-	2	3	11
Rubella	-	-	-	1	4	-	-	-	-	-	-	1	6
Infective Hepatitis	15	26	7	15	7	17	10	17	20	27	13	6	180
Pink Eye	-	-	4	-	-	-	-	-	-	-	-	-	4
Puerperal Pyrexia	-	-	-	-	-	-	-	-	-	-	-	-	1
Pneumonia	-	1	-	-	-	-	1	-	-	-	-	-	2
Erysipelas	-	-	-	-	-	-	1	-	-	-	-	-	1
Observation	13	10	22	11	24	24	15	22	15	16	15	9	196
Total	68	141	156	64	127	108	73	93	63	96	90	77	1156

INFECTIOUS DISEASES - PLAYGROUPS

	Total	1	5	1	1	1	4	1	1	9	13	5
	Chicken Pox	-	3	1	-	-	-	-	-	4	3	4
	Whooping Cough	-	-	-	-	-	-	-	-	-	-	-
Mencap		-	-	-	-	-	-	-	-	-	-	-
Berkeley		-	-	-	-	-	-	-	-	-	-	-
Bughtric House		-	-	-	-	-	-	-	-	-	-	-
Ashby Community Centre		-	-	-	-	-	-	-	-	-	-	-
Ashby Church Hall		-	-	-	-	-	-	-	-	-	-	-
Avenue Vivian		-	-	-	-	-	-	-	-	-	-	-
Church Lane		-	-	-	-	-	-	-	-	-	-	-
Lincoln Gardens		-	-	-	-	-	-	-	-	-	-	-
Park View		-	-	-	-	-	-	-	-	-	-	-
Ashby Road		-	-	-	-	-	-	-	-	-	-	-
Priory Lane		-	-	-	-	-	-	-	-	-	-	-
Riddings		-	-	-	-	-	-	-	-	-	-	-
Riddings Community Centre		-	-	-	-	-	-	-	-	-	-	-
St. George's		-	-	-	-	-	-	-	-	-	-	-
St. Lawrence's		-	-	-	-	-	-	-	-	-	-	-
Westcliff		-	-	-	-	-	-	-	-	-	-	-
West Common Lane		-	-	-	-	-	-	-	-	-	-	-
Total	7	-	5	1	9	11	-	14	47			

ANNUAL RETURN OF FOOD POISONING

1. (a) Food Poisoning Notifications (Corrected as returned to Registrar General.

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total
5	5	-	-	10

- (b) Cases otherwise ascertained

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total
-	-	-	-	-

- (c) Symptomless Excretors

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total
-	-	-	-	-

- (d) Fatal Cases

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total
-	-	-	-	-

2. Particulars of Outbreaks

	No. of Outbreaks		No. of Cases		
	Family Outbreaks	Other Outbreaks	Notified	Otherwise Ascertained	Total
Agent Identified	-	-	-	-	-
Agent not Identified	1	-	3	-	3

3. Single Cases

No. of Cases

	Notified	Otherwise Ascertained	Total No. of Cases
Agent Identified	4	-	4
Agent not Identified	3	-	3

B COMMUNITY HEALTH SECTION

ATMOSPHERIC POLLUTION
INDUSTRIAL

The British Steel Corporation has, of course, a virtual monopoly of local heavy industry in the town but, in fact, very few complaints of industrial pollution have been received from the general public, although pollution has been caused at intervals by breakdown of ageing precipitators etc.

The latest Scunthorpe steelworks development scheme, the £230 million "Anchor" project, is now nearing completion and is expected to reach full scale production next year. It includes, as well as a near mile-long mills complex, a new oxygen steelmaking plant which will produce 4.4 million tons annually. As a result, all existing Open Hearth and Rotor steelmaking facilities at the local works will be taken out of service.

The new BOS steelmaking process being used is, of course, a "Scheduled Process" under the Alkali Acts, and thereby the province of the Alkali Inspectorate, which has maintained close liaison with both the British Steel Corporation and Local Authority during the year.

Considerable attention has been paid during the overall design and construction of the project to the prevention of pollution. In round figures, the overall cost for this alone has been some £4 million.

The main problems centred around the BOS plant and extensive measures have been taken to prevent air pollution arising from this source.

High energy wet scrubbers have been installed to clean:-

1. The BOS vessel gases, which are collected with minimum combustion and therefore minimum volume,
2. the gas from the secondary ventilation system which collects leakage from the vessels plus charging and tapping fume; and
3. the gas from the hot metal reladling station.

In addition, bag filter plants have been installed to collect dust arising in the flux handling system, the scrap burning plant and the mould bottom plate cleaning plant.

In the Bloom/Billet Mill area, the fume from the hot scarfing machine is removed by an electrostatic precipitator.

All of which should contribute to an even cleaner Scunthorpe.

APPLICATIONS FOR CHIMNEY HEIGHTS AND FURNACES - 1972

	<u>CHIMNEYS</u>	<u>FURNACES</u>
Received	2	1
Approved	2	1

During 1972, the fuel crisis of the winter months of 1971/1972 abated, thus allowing the Smoke Control Office to progress work in a less restricted manner, after the set-backs of the immediate past years of strikes and shortages of solid smokeless fuels.

SMOKE CONTROL AREA NO. 9

Application for confirmation of Smoke Control Area No. 9 was made to the Department of the Environment in January, 1972.

Inspections of private dwellings and commercial premises were carried out by the Technical Assistants and the following information was obtained for the Department of the Environment.

1.	Total number of industrial premises	NIL
2.	Total number of commercial premises	32
3.	Total number of privately owned premises	841
4.	Total number of Local Authority owned premises	64
5.	Total number of other premises	9
6.	Total Acreage	143

Confirmation of Area No. 9 was received from the Department of the Environment on 29th March, 1972, with an operative date of 1st July, 1973.

In May 1972, conversion of fireplaces in Area No. 9 commenced.

As this area does not become operative until 1st July, 1973, the following information denotes progress up to 31st December, 1972:-

No. of applications approved Area No. 9	140
No. of grant payments Area No. 9	88
No. of grant payments Area No. 8	30

---ooOoo---

Composite information re: Smoke Control Area No. 9 - During 1972

Number of DWELLINGS which received grant approval 140

Number of APPLIANCE conversions approved re: above 216

These were:-

Gas	180 (83.34%)
Smokeless Solid Fuel	24 (11.11%)
Electricity	12 (5.55%)
Oil	NIL (NIL %) 216

Number of CENTRAL HEATING installations included in above 23

These were:-

Gas	17 (26 fireplaces)
Smokeless Solid Fuel	6 (10 fireplaces)
Electricity	NIL
Oil	NIL 23

Number of approvals for Electric Storage Heaters

These were:- 5 (8 fireplaces)

---oo0oo---

The following appliances were also approved for grant allocation:-

- 1 Gas Cooker
- 7 Immersion Heaters
- 2 Electric Firelighters

No. of visits by Technical Assistants 936

No. of interviews (including telephone calls received
by Technical Assistants) 542

---oo0oo---

Proposed Smoke Control Area No. 10 - During 1972

Inspections were commenced in the proposed Smoke Control Area No. 10 by the Technical Assistants, of private dwellings and commercial premises. Local Authority premises were also noted.

This is a comparatively large area and the following information was obtained for submission to the Department of the Environment:-

1. Total number of industrial premises NIL
2. Total number of commercial premises 148
3. Total number of private dwellings 1662
4. Total number of Local Authority dwellings 1293
5. Total number of Other dwellings 96
6. Total Acreage 398

No. of visits by Technical Assistants 1350

No. of interviews (including telephone calls received
by Technical Assistants) 250

SMOKE CONTROL AREAS

OVERALL STATISTICAL INFORMATION AS AT 31ST DECEMBER, 1972

AREA NO.	ACREAGE	DATE OF OPERATION	NUMBER OF HOUSES NOW WITHIN THE AREA		
			PRIVATE	COUNCIL	TOTAL
1.	313	1.6.61	252	1816	2068
2.	1350	1.6.62	1792	1209	3001
3.	180	1.6.63	1004	459	1463
4.	96	1.6.64	719	60	779
5.	712	1.12.66	1781	1159	2940
6.	132	1.3.68	536	453	989
7.	212	1.10.69	592	700	1292
8.	390	30.9.71	1252	181	1433
TOTALS	3385		7928	6037	13965
FULL TOTAL IN ENTIRE TOWN	7895		13546	9364	22910
% UNDER SMOKE CONTROL ORDERS	42.88%		58.52%	64.47%	60.10%
9. <u>AT PRESENT PROGRESSING</u>					
	143	1.7.73	841	64	905
10. <u>PROPOSED NEXT AREA</u>	398	1.10.74	1662	1293	2955

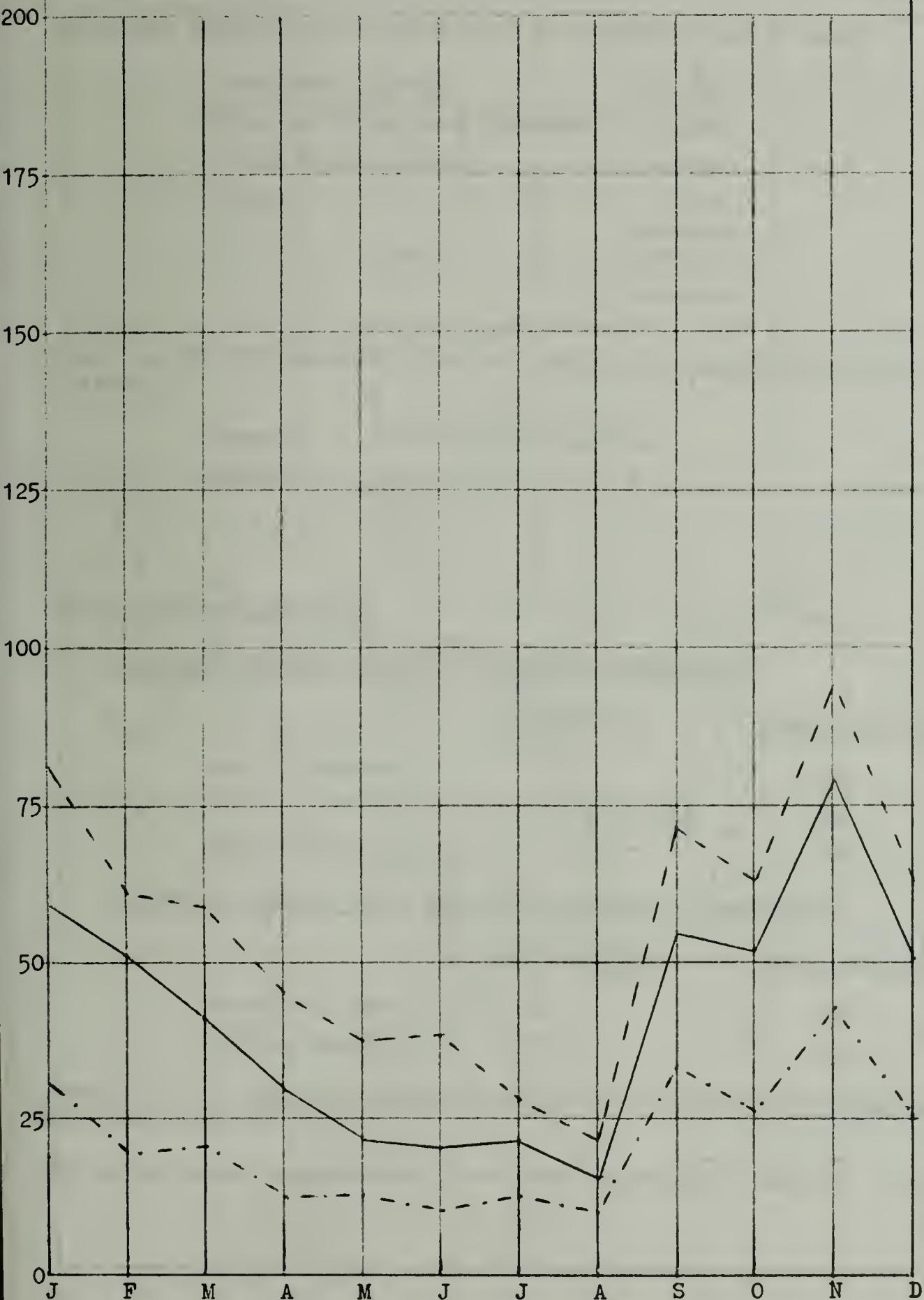
SMOKE

MONTHLY AVERAGES 1972 (MICROGRAMMES/CUBIC METRE)

Station No. 1 : Public Health Inspector's Dept. —

Station No. 2 : Britannia Corner - - - - -

Station No. 3 : Riddings Junior School -.-.-.-.-

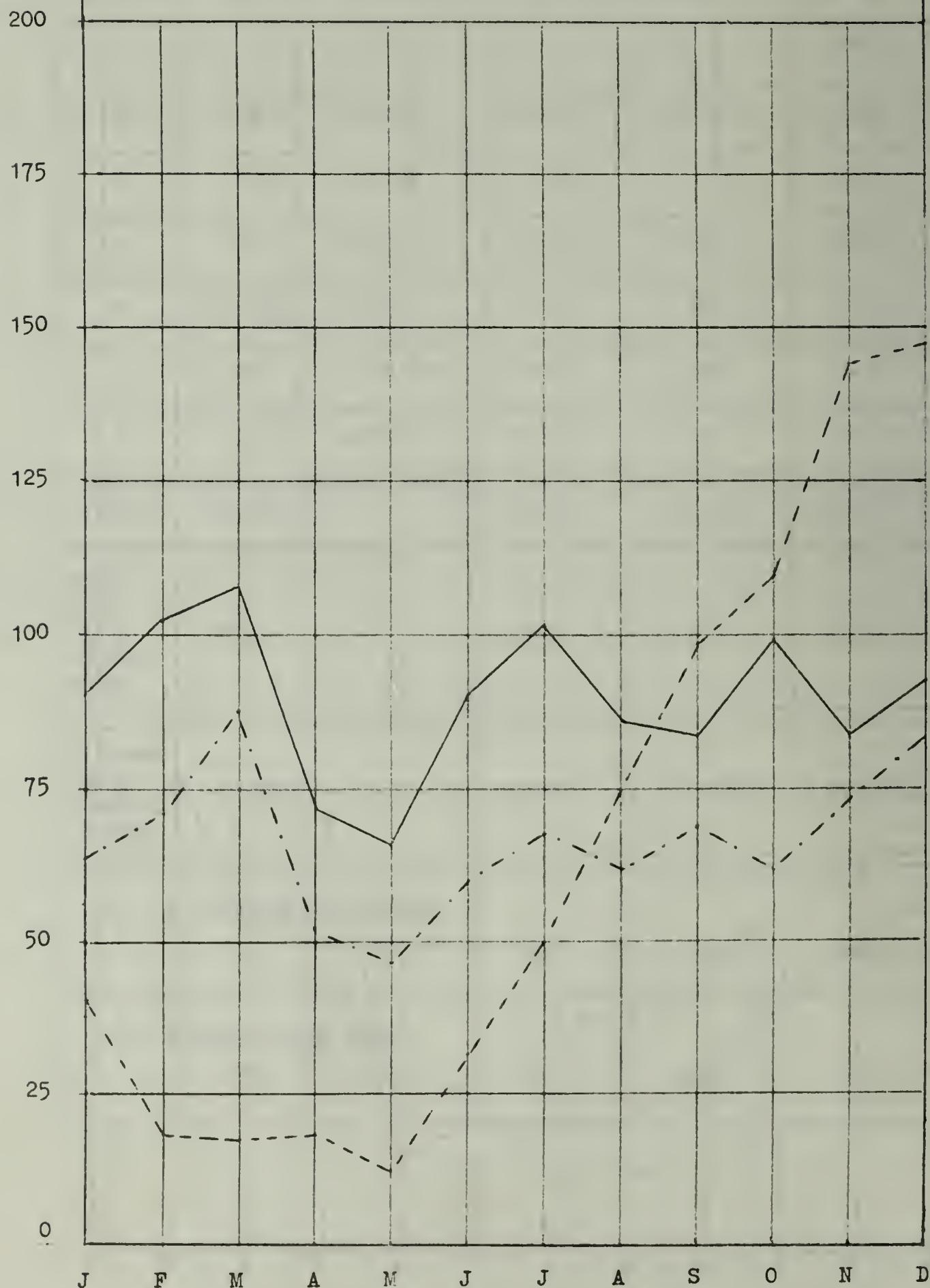


SULPHUR DIOXIDE
MONTHLY AVERAGES 1972 (Microgrammes/Cubic Metre)

Station No. 1: Public Health Inspector's Dept —

Station No. 2: Britannia Corner - - - - -

Station No. 3: Riddings Junior School -.-.-.-.



WATER SUPPLIES

The following information has been supplied by the Borough Engineer:-

Consumption in N.L.W.B. Area - Year ended 31st December, 1972

Total Consumption (1972) : 4,325,614,000 Gallons (11.84 M.G.D.)
Metered Consumption (1972) : 2,599,868,000 " (7.10 M.G.D.)
Domestic Consumption (1972) : 1,725,746,000 " (4.74 M.G.D.)

Estimated population 30th June 1972 as follows (N.L.W.B. Area)

Scunthorpe Borough	70,330
Glanford Brigg Rural District	45,530
Brigg Urban District	4,890
Barton	7,670
<hr/>	<hr/>
Total	128,420
<hr/>	<hr/>

Based on 128,000 consumers, the per capita daily consumptions are as follows:-

Domestic	36.8	gallons/head/day
Metered	55.5	" " "
	<hr/>	<hr/>
	92.3	" " "
	<hr/>	<hr/>

Water Supplies (Domestic)

(1) Number of samples taken for Chemical Examination:-

	<u>Satisfactory</u>	<u>Unsatisfactory</u>
Public Supplies	8	Nil
	3 (P.H.I.s)	Nil
Private Supplies	Nil	Nil

(2) Number of samples taken for Bacteriological Examination:-

	<u>Satisfactory</u>	<u>Unsatisfactory</u>
Public Supplies	26	Nil
Private Supplies	Nil	Nil

Details of the Chemical samples taken by the Public Health Inspectors are shown separately.

The entire water supplies are fluoridated at source to achieve 1.0.p.p.M.

1972 CHEMICAL - MAINS
CHEMICAL ANALYSIS - WATER

Ref. No.	CM/U/1	CM/U/2	CM/U/3
Date taken	23.3.72	11.5.72	11.5.72
Where taken	Melting Shop Welfare A.F.	192 Princess House	23 Lister Road
<u>Physical Characteristics</u>			
Suspended matter	NONE	Heavy Trace	NONE
Appearance of a column 2' long	Clear Colourless	Yellowish Turbid	Clear Colourless
Taste	Normal		Normal
Odour	None	None	None
<u>Chemical Examination</u>		PARTS PER MILLION	
Total solids dried at 180°	740.0	688.0	628.0
Chlorides in terms of Chlorine	43.0	73.0	69.0
Equivalent to Sodium Chloride	70.9	120.3	113.7
Nitrates	None	None	Faint Trace
Nitrates as Nitrogen	0.13	1.64	1.61
Poisonous metals	Less than 0.04	Less than 0.04	Less than 0.04
Total hardness	502.0	236.0	224.0
Temporary hardness	240.7	125.0	120.0
Permanent hardness	261.3	111.0	104.0
Oxygen absorbed in 4 hrs. @ 80° F	0.12	0.16	0.16
Ammoniacal Nitrogen	0.072	0.080	0.096
Albuminoid Nitrogen	0.032	0.048	0.024
Total Residual Chlorine	0.04	None	None
Sodium Bicarbonate		Iron 7.5 Manganese	
P.H. Value	7.2	1.02 7.7	7.7
<u>Bacteriological Exam.</u>			
B. Coli Test (MacConkeys Bile Salt Lactose Broth)		Copper 0.84	
Probable number of coliform organisms per 100 ml.			

Swimming Baths

amples of water were taken at regular intervals from the Public Baths, also swimming pools attached to the schools. The results are tabulated below:-

	BACTERIOLOGICAL		CHEMICAL	
	SATISFACTORY	UN-SATISFACTORY	SATISFACTORY	UN-SATISFACTORY
St. Hugh's Public Baths	4	-	-	-
Henderson Avenue Junior School	17	1	5	1
John Leggott College	10	1	1	1
Riddings Comprehensive	12	-	3	2
	8	2	3	1
TOTALS	51	4	12	5

unsatisfactory samples were followed up with satisfactory samples.

Swimming Pools

amples of water were taken during the summer months. The following are the results:-

	<u>SATISFACTORY</u>	<u>UNSATISFACTORY</u>
Central Park	1	-
Offield Park	1	1
TOTALS	2	1

Public Baths Attendance Figures

Baths, Entertainment and Catering Officer has supplied the attendance figures for 1972.

Number of swimmers (excluding school parties) using baths	191,372
Number of swimmers (school parties) using the baths	40,073
Number of swimmers (Clubs) using the baths	23,577
TOTAL	255,022

1972

CHEMICAL ANALYSIS - WATER

Ref. No.	CS/U/1	CS/U/2	CS/U/3	CS/U/4	CS/
Date taken	15.12.71	15.12.71	9.2.72	9.2.72	23.
Where taken	Public Baths Small Pool	J. Leggott College	Public Baths Small Pool	J. Leggott College	Pub Sma
<u>Physical Characteristics</u>					
Suspended matter	NONE	NONE	NONE	NONE	Fai
Appearance of a column 2' long	Clear	Clear Colourless	Clear Colourless	Clear Colourless	Cle Col
Taste					
Odour	Chlorinous	Chlorinous	Slightly Chlorinous	Slightly Chlorinous	Chl
<u>Chemical Examination</u>		PARTS PER MILLION			
Total solids dried at 180°	1100.0	632.0	1016.0	556.0	10
Chlorides in terms of Chlorine	296.0	144.0	360.0	109.0	2
Equivalent to Sodium Chloride	488.0	237.4	428.6	179.7	4
Nitrates	NONE	NONE	SLIGHT TRACE	FAINT TRACE	N
Nitrates as Nitrogen	3.7	10.8	1.73	8.81	
Poisonous metals	LESS THAN 0.04	LESS THAN 0.04	LESS THAN 0.04	LESS THAN 0.04	LES
Total hardness					
Temporary hardness					
Permanent hardness					
Oxygen absorbed in 4 hrs. @ 80° F	0.84		1.48	1.24	
Ammoniacal Nitrogen	0.32	0.16	0.480	0.320	
Albuminoid Nitrogen	0.40	0.20	0.560	0.200	
Free Chlorine					
Sodium Bicarbonate					
P.H. Value	7.3	7.4	7.6	7.9	
Residual Chlorine	3.15	6.9	0.40	0.35	
<u>Bacteriological Exam.</u>					
B. Coli Test (MacConkeys Bile Salt Lactose Broth)					
Probable number of coliform organisms per 100 ml.					

1972

CHEMICAL ANALYSIS - WATER

	CS/U/5(6)	CS/U/6(7)	CS/U/8	CS/U/9	CS/U/10
taken	19.4.72	19.4.72	3.5.72	3.5.72	21.6.72
taken	Public Baths Small Pool	J. Leggott College	Henderson Ave. Jun.	Riddings Comp.	J. Leggott College
<u>Physical Characteristics</u>					
dried matter	Faint Trace	Clear	Slight Trace	None	None
ance of a 2' long	Clear Colourless	Clear Colourless	Clear Faintly Yell	Clear Colourless	Clear Colourless
	Slightly Chlorinous	Chlorinous	Faintly Chlorinous	Slightly Chlorinous	Chlorinous
<u>Chemical Examination</u>		PARTS PER MILLION			
solids dried at 180°	1090.0	598.0	801.0	658.0	656.0
des in terms of ne	248.0	120.0	141.0	111.1	127.0
lent to Chloride	468.0	197.8	232.4	183.0	209.4
es	None	None	None	None	None
es as Nitrogen	1.53	12.00	2.60	13.71	11.86
ous metals	Less than 0.04	Less than 0.04	Less than 0.04	Less than 0.04	Less than 0.04
hardness					
ary hardness					
ent hardness					
absorbed in @ 80°F	2.72	0.12	2.32	2.56	1.20
iacial Nitrogen	0.400	0.120	0.800	0.360	0.160
inoid Nitrogen	0.800	0.240	0.320	0.560	0.400
Residual ne	0.58	3.55	0.29	0.44	0.62
Bicarbonate					
alue	6.6	7.1	7.7	7.5	7.7
<u>Biological Exam.</u>					
i Test (MacConkeys alt Lactose Broth)					
le number of coliform isms per 100 ml.					

1972

CHEMICAL ANALYSIS - WATER

Ref. No.	CS/U/11	CS/U/12	CS/U/13	CS/U/14	CS/U/15
Date taken	21.6.72	5.7.72	5.7.72	17.8.72	17.8.72
Where taken	Public Baths Large Pool	Riddings Comp.	Public Baths Small Pool	Riddings Comp.	J. I. Col
<u>Physical Characteristics</u>					
Suspended matter	None	None	None	None	Non
Appearance of a column 2' long	Clear Colourless	Clear Colourless	Clear Colourless	Clear Colourless	Cle Col
Taste	Slightly Chlorinous				
Odour		Chlorinous	Chlorinous	Chlorinous	Chl
<u>PARTS PER MILLION</u>					
<u>Chemical Examination</u>					
Total solids dried at 180°	1124.0	878.0	1112.0	811.0	6
Chlorides in terms of Chlorine	289.0	172.0	254.0	210.0	1
Equivalent to Sodium Chloride	474.8	283.4	418.8	346.2	2
Nitrates	None	None	None	Faint Trace	Fa
Nitrates as Nitrogen	3.44	12.75	3.22	1.05	
Poisonous metals	Less than 0.04	Less than 0.04	Less than 0.04	Less than 0.04	Les
Total hardness					
Temporary hardness					
Permanent hardness					
Oxygen absorbed in 4 hrs. @ 80°F	3.48	2.16	1.76	2.26	
Ammoniacal Nitrogen	0.480	0.200	0.160	0.72	
Albuminoid Nitrogen	0.880	0.400	0.560	0.72	
Total Residual Chlorine	0.51	0.55	0.52	0.83	
Sodium Bicarbonate					
P.H. Value	7.4	7.6	7.4	7.4	
<u>Bacteriological Exam.</u>					
B. Coli Test (MacConkeys Bile Salt Lactose Broth)					
Probable number of coliform organisms per 100 ml.					

1972

CHEMICAL ANALYSIS - WATER

	CS/U/16	CS/U/17		
en	12.10.72	12.10.72		
ken	Henderson Ave. Jun.	Riddings Comp.		
<u>Characteristics</u>				
red matter	Faint Trace	Faint Trace		
nce of a ' long	Clear: Faintly Yell.	Clear: Faintly Yell.		
	Faintly Chlorinous	Faintly Chlorinous		
<u>Examination</u>				
solids dried at 180°				
	PARTS PER MILLION			
	1529.0	717.0		
les in terms of ie	452.0	93.0		
agent to Chloride	745.2	153.3		
	Slight Trace	Slight Trace		
es as Nitrogen	3.0	10.4		
us metals	Less than 0.04	Less than 0.04		
ardness				
ry hardness				
nt hardness				
absorbed in @ 80° F	2.0	1.42		
cal Nitrogen	0.60	0.36		
oid Nitrogen	1.60	0.56		
esidual e	0.2	0.3		
Bicarbonate				
lue	8.1	7.8		
<u>iological Exam.</u>				
Test (MacConkeys lt Lactose Broth)				
the number of coliform ms per 100 ml.				

FOOD AND DRUGS

MILK

The following Licences are in force:-

- | | | |
|----|---|-----|
| 1. | Dealer's (Pasteuriser's) Licence authorising use of the special designation "Pasteurised". | 1 |
| 2. | Dealer's (Steriliser's) Licence authorising the use of the special designation "Sterilised". | 1 |
| 3. | Dealer's (Ultra Heat Treated) Licence authorising the use of special designation "Ultra Heat Treated". | 1 |
| 4. | Dealer's (Pre-Packed Milk) Licence authorising the use of the special designation "Pasteurised". | 19 |
| 5. | Dealer's (Pre-Packed Milk) Licence authorising the use of the special designation "Sterilised". | 110 |
| 6. | Dealer's (Pre-Packed Milk) Licence authorising the use of the special designation "Ultra Heat Treated". | 13 |

Samples of heat treated milk were taken for testing and analysis throughout the year and details of the results follow.

RESULTS OF SAMPLES OF HEAT TREATED MILK

BACTERIOLOGICAL

NUMBER OF SAMPLES TAKEN	SATISFACTORY	UNSATISFACTORY	UNSATISFACTORY		
			METHYLENE BLUe	PHOSPHATASE	TURBIDITY
Homogenised	33	33	0	0	0
Pasteurised	33	33	0	0	0
Sterilised	33	33	0	0	0
TOTALS	99	99	0	0	0

All untreated milk is now received in bulk containers. There is no practical way to sample raw milk and check on individual farms.

ICE CREAM

There are two premises for the manufacture of ice cream and 196 pre registered for the storage and sale of this commodity.

During the year, both chemical and bacteriological samples of ice cream were taken. Following are the results:-

NUMBER AND TYPE OF SAMPLES TAKEN	GRADE			
	1	2	3	4
Bacteriological	14	1	2	0
		SATISFACTORY	UNSATISFACTORY	
Chemical	3		0	

Ice Cream samples having a resultant grade of two or three were subsequently followed up with satisfactory samples.

FOOD SAMPLING (CHEMICAL)

147 informal samples of Food & Drugs were taken during the year under the Food & Drugs Act 1955. Four were unsatisfactory.

Item	No.	Item	No.
Artificial Sweetening Tablets	3	Ice Cream	1
Almond Oil B.P.	3	Low Fat Soft Cheese	1
Almond Marzipan	3	Low Calorie Lemon Drink	1
Almond Flavouring	4	Lemon Juice (Unsweetened)	1
Bloater Fish Paste	1	Liquid Extract of Cascara B.P.	2
Blackcurrant Syrup B.P.C.	1	Low Sugar Marmalade	1
Blackcurrant Health Drink	1	Margarine	3
Beef Risotto	1	Minced Beef & Onions with Gravy	1
Beef Curry with Rice	1	Minced Steak & Onions in Gravy	1
Boric Acid Ointment B.P.C.	3	Milk Chocolate free from Sugar	1
Boric Acid Ointment B.P.C.63	1	Milk Chocolate Full Cream	1
Cream of Chicken Soup	2	Oxtail Soup	2
Creamed Vegetable Soup	1	Olive Oil	4
Creamed Rice Pudding	3	Parsley & Thyme Stuffing	2
Cocktail Sausage In Brine	1	Pure Malt Vinegar	3
Curry Powder	3	Pure Honey	3
Condensed Tomato Puree	3	Plain Chocolate Free from Sugar	1
Cheese Blended with Beer	1	Pork Sausage	3
Currants	4	Polony	3
Chicken Curry with Rice	1	Pure Lard	2
Cherry Menthol Cough Sweets	1	Pure Vegetable Cooking Oil	1
Cough Drops	2	Rose Hip Syrup	3
Cascara Evacuant	1	Sage & Onion Stuffing	1
Curry Continental Soup	1	Self Raising Flour	3
Cherry Flavoured Table Jelly	1	Salmon Spread	2
Cornish Pasties	3	Stuffed Pork Roll	1
Cooking Fat	1	Scotch Mince Beef with Gravy	1
Cooking Oil	1	Stoned Raisins	1
Cooking Oil Pure Corn	1	Seedless Raisins	1
Drink for Diabetics (Whole Orange)	1	Sugarless Jelly	1
Dairy Ice Cream	2	Strawberry Flavoured Dessert	1
Diabetic Marmalade	2	Sausage Rolls	3
Double Cream	2	Steak & Kidney Pies	6
Dairy Cream	1	Salmon Fish Cakes	1
Dairy Cream Trifle	1	Sultanas	4
Fresh Pears	1	Zinc & Castor Oil Cream B.P.	3
Fresh Apples	2		
Fresh Cream Cakes	3		
Full Fat Soft Cheese	1		
Fish Cakes	2		
Ground Almonds	4		
Hot Dog Sausages in Brine	2	Total	47

Details of the Unsatisfactory Samples are as follows:

1. Ref.No. of Sample: 4777
Nature of Sample: Liquid Extract of Cascara
Formal/Informal: Informal
Report: The constituents of the sample included the following substances in proportions as under:
- Requirements by t
- | | | |
|--------------|----------------|------------------|
| Total Solids | 23.69 per cent | 20.26 per cent W |
| Alcohol | 18.0 per cent | 21.24 per cent V |
- Having regard to the requirements of the B.P. the results show the sample to be deficient in Alcohol 14 per cent.
- Action Taken: All stock withdrawn from shop and disposed of.
2. Ref.No. of Sample: 4798
Nature of Sample: Strawberry Flavour Dessert - No Sugar or Starch
Formal/Informal: Informal
Report: The Calorific value of the contents of the pack amounted to 44 kilocalories which is excessive having regard to the statement on the label claiming 30 kilocalories per packet. The sample contained the permitted colour Ponceau 4 R.
- Action Taken: All existing stock withdrawn from sale and Store Manager to follow up with manufacturers.
3. Ref.No. of Sample: 4822
Nature of Sample: Steak and Kidney Pie
Formal/Informal: Informal
Report: The sample contained 18.9 per cent of meat. It was free from preservatives. According to the Meat Pie and Sausage Roll Regulation 1967, a sample described as Steak & Kidney Pie must contain not less than 25 per cent of meat. The sample was therefore deficient in meat to the extent of 24.4. per cent.
- Action Taken: Informal follow up sample taken - result satisfactory.
4. Ref.No. of Sample: 4824
Nature of Sample: Steak and Kidney Pie
Formal/Informal: Informal
Report: The sample contained 18.0 per cent of meat. It was free from preservatives. According to the Meat Pie and Sausage Roll Regulation 1967, a sample described as Steak & Kidney Pie must contain not less than 25 per cent of meat. The sample was therefore deficient in meat to the extent of 28 per cent.
- Action Taken: Informal follow up sample taken - result satisfactory.

MEAT INSPECTION

The meat at the Public Abattoir continues to receive full inspection. The private slaughterhouse (Fisher Ltd., Lindum Street) was closed on the 31st December, 1971 and the Slaughterhouse Licence was not issued for 1972. These premises are situated in a redevelopment area and are due to be demolished in the near future.

Public Abattoir.

There was an increase in the following animals inspected:-

	<u>1972</u>	<u>1971</u>
Pigs	11,233	10,604

There was a decrease in the following animals inspected:-

	<u>1972</u>	<u>1971</u>
Beasts	4698	5266
Cows	4	21
Sheep	4927	5766

Condemnation

The whole carcases condemned were affected with:-

Cattle	1	Emaciation
Pigs	9	Multiple Abscesses
	2	Pyrexia
	2	Emaciation
	1	Septiceamia
	1	Septic Enteritis
	1	Lymphadenitis
	1	Moribund
	1	Swine Erysipelas
	1	Uraemia

ANIMALS SLAUGHTERED

The following table shows the number of Animals Slaughtered during 1972

M O N T H	A B A T T O I R				
	BEASTS	COWS	SHEEP	PIGS	CALVES
January	457	-	357	962	-
February	355	-	366	737	-
March	542	-	410	1116	2
April	375	-	218	837	-
May	409	2	271	885	-
June	307	-	311	706	-
July	392	1	667	1031	1
August	466	-	697	944	-
September	377	-	479	970	-
October	415	-	471	873	-
November	418	1	470	1194	-
December	185	-	210	978	-
TOTALS	4698	4	4927	11233	3

	CATTLE EXCLUDING COWS	COWS	CALVES	SHHEEP	PIGS
Number Killed	4698	4	3	4927	11,233
Number Inspected	4698	4	3	4927	11,233
All Diseases except Tuberculosis and C. Bovis					
Whole Carcasses condemned	1	NIL	NIL	NIL	19
Percentage of number inspected affected with Disease other than Tuberculosis and Cysticerci	15.5%	NIL	NIL	1.8%	8.8%
Tuberculosis Only					
Whole Carcasses condemned		NIL	NIL	NIL	NIL
Carcasses of which some part or organ was condemned		NIL	NIL	NIL	40
Percentage of number inspected affected with Tuberculosis		NIL	NIL	NIL	0.35%
C. Bovis Only					
Carcasses of which some part or organ was condemned	13	NIL	NIL	NIL	NIL
Carcasses submitted to Treatment by Refrigeration	2	NIL	NIL	NIL	NIL

UNFIT MEAT SURRENDERED 1972

The following table shows the amount of meat surrendered after examination, giving weight in pounds and the disease or cause of unfitness:-

	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	TOTAL
Tuberculosis	97	16	47	90	29	29	22	43	20	0	34	36	463
Abscesses	852	665	461	757	936	713	420	516	917	414	542	592	7,785
Arthritis	12	6	69	13	69	71	18	45	24	0	21	72	420
Actinomycosis	60	0	120	0	0	0	0	30	20	0	30	60	320
Injury	35	138	113	22	114	97	50	5	116	284	141	51	1,166
Cysticercus Bovis	5	0	0	0	0	0	8	0	30	8	24	65	140
Dropsey & Emaciation	199	0	721	0	0	0	241	0	454	0	0	0	1,615
Fevered	0	0	0	0	0	0	0	0	0	0	0	0	0
Septicaemia	0	0	0	0	0	109	0	0	0	0	0	0	109
Decomposition	290	10	28	20	80	33	189	290	327	55	6	110	1,438
Moribund	0	0	253	0	0	0	0	0	0	0	0	0	253
Inflammation & Pneumonia	153	158	171	158	258	284	189	259	270	266	222	146	2,534
Parasitical Infestation	124	294	194	291	106	365	478	381	449	166	333	118	3,299
Other Conditions	250	37	101	57	79	70	59	85	187	28	323	203	1,479
Totals	2077	1324	2278	1408	1671	1771	1674	1654	2814	1221	1676	1453	21,021

OFFICES, SHOPS AND RAILWAY PREMISES ACT 1963

Registration and General Inspections 1972

Class of Premises	No. of Premises registered during the year.	Total No. of registered premises at end of year	No. of registered premises receiving a general inspection during year.
1. Offices	18	215	17
2. Retail Shops	32	574	223
3. Wholesale Shops, Warehouses	6	26	9
4. Catering Establishments open to the Public Canteens	Nil	67	20
5. Fuel Storage Depots	Nil	5	1
Total	56	887	270

Number of visits of all kinds by inspectors to registered premises: 570

Analysis of Persons Employed in Registered Premises by Work Place

Class of Work Place	No. of Persons Employed
1. Offices	1085
2. Retail Shops	3056
3. Wholesale departments, Warehouses	261
4. Catering Establishments Open to the Public	452
5. Canteens	35
6. Fuel Storage Depots	19
Total	4908
Total Males	1737
Total Females	3171

Number of Inspectors appointed under Section 52(1) of (5) of the Act = 6

Offices, Shops and Railway Premises Act 1963

Notices served and abated

Premises	No. of Notices Served	No. of Notices Abated
1. Shops	35	16
2. Offices	6	6
3. Wholesale/Warehouses	4	3
4. Catering Establishments	9	3
5. Canteens	NIL	NIL

Details of Items Covered by Notices Served During Year

ITEMS	No. of Contraventions				
	SHOPS	OFFICES	CATERING EST.	CANTEENS	WHOLESALE
1. Accommodation for clothing	1	-	-	-	-
2. Additional Handrail to Staircase	4	-	-	-	-
3. Cleanliness	3	-	-	-	-
4. First-Aid Provision and Replenishing Stocks	15	5	-	-	-
5. Guarding Machinery	2	-	2	-	-
6. Hot and Cold Water	2	1	2	-	-
7. Impervious Surfaces	1	-	-	-	-
8. Information for Employees	20	2	3	-	-
9. Lighting	-	-	-	-	-
10. Obstructions	2	1	-	-	-
11. Overcrowding	-	-	-	-	-
12. Prohibit Smoking	1	-	-	-	-
13. Protect open food on Display	-	-	-	-	-
14. Provide Refuse Bins	-	-	1	-	-
15. Provide seats for Staff	1	-	-	-	-
16. Provide towel, soap and Nail Brush	2	1	1	-	-
17. Provision of Forms	9	2	-	-	-
18. Redecorations	5	1	-	-	-
19. Removal of Rubbish	-	1	-	-	-
20. Repairs to Stairs, Floors etc.	2	-	-	-	-
21. Sanitary Conveniences	7	2	1	-	-
22. Temperature	2	-	-	-	-
23. Thermometer	14	4	-	-	-
24. Ventilation	3	-	-	-	-
25. Wash hand Basins	1	-	-	-	-
Total Number of Items	97	20	10	-	-

OFFICES, SHOPS AND RAILWAY PREMISES ACT 1963

Notification of Accidents (Section 48 and L.A. Circular 8)

Seventeen accidents were reported during the year, sixteen accidents were all of a minor nature. The one fatal accident occurred at a Fuel Storage Depot, whilst loading bags of fuel, the driver/delivery man was trapped and crushed between the bucket of loading shovel and the loading hopper.

Analysis of all accidents as follows:

Workplace	Number Reported		Total Number Investigated	Action Recommended			No Action
	Fatal	Non-Fatal		Prosecution	Formal Warning	Informal Advice	
1. Offices		1	1	-	-	-	1
2. Retail Shops		12	6	-	-	4	12
3. Wholesale Shops, Warehouses		1	1	-	-	1	1
4. Catering Establishments Open to the Public Canteens		2	1	-	-	-	2
5. Fuel Storage Depots	1	-	1	-	-	1	1
TOTAL	1	16	10	-	-	6	17

Analysis of Reported Accidents

Accident	Offices	Retail Shops	Wholesale Shops, Warehouses	Catering Establishments, Open to the Public Canteens	Fuel Storage Depots
1. Machinery	-	-	-	-	-
2. Transport	-	-	-	-	1
3. Falls of Persons	1	4	-	1	-
4. Stepping on or Striking Against Object or Person	-	4	-	-	-
5. Handling Goods	-	4	1	1	-
6. Struck by Falling Object	-	-	-	-	-
7. Fires and Explosions	-	-	-	-	-
8. Electricity	-	-	-	-	-
9. Use of Hand Tools	-	-	-	-	-

Services under the Food and Drugs Act, 1955

(A) Milk Supplies - Brucella Abortus

- (i) Number of samples of raw milk examined..... NONE
(ii) Number of positive samples found..... NONE
(iii) Action taken in respect of positive samples..... NONE

(B) Food Hygiene (General) Regulations, 1970

The number of food premises subject to these regulations grouped in categories of trade carried on in them:

TYPE OF BUSINESS	NUMBER
Bakers and Confectioners	25
Butchers	33
Cafes	20
Restaurants/Licensed Premises/Canteens	53
Fishmongers	3
Fish Friers	37
Grocers and Provision dealers	129
Greengrocers and Fruiterers	11
Sugar, confectionery, ice cream etc.	23
Others	14
Ice Cream Manufacturers	3
TOTAL	351

FOOD HYGIENE (GENERAL) REGULATIONS 1970

Food Shops

The number of shops involved in informal action was 17. Contraventions were as follows:-

<u>Contravention</u>	<u>No. of Shops involved</u>
1. Cleanliness	7
2. Cleanse and redecorate w.c.	6
3. Provide wash-hand basin with a supply of hot and cold water	2
4. Defective wall surfaces	4
5. Cleanse utensils and equipment	1
6. Provide First Aid equipment	1
7. Prevent contamination by flies	1
8. Provide soap, clean towels and nail brush	9
9. Prohibit smoking in food preparation room	2
10. Protect from contamination by customers food on display	4
11. Provide receptacles for putrescible waste	3
12. Display hygiene notices in toilets	4
13. Redecoration required	6
14. Repairs to floors	4
15. Replace worn treads on stairs	1
16. Thermometers	1
17. Provide w.c. for staff	2
18. Cease the practice of storing outdoor clothing in food store	1
	<hr/>
TOTAL	59

The Town Clerk reported that a grocer had been prosecuted for three offences of failing to comply with the above regulations and had been fined a total of £70

SHOPS ACT 1950

Non Food Shops

The number of shops involved in informal action was 6. Contraventions in these shops were as follows:-

<u>Contravention</u>	<u>No. of Shops involved</u>
Exhibit Form 'F' in accordance with Shops Act 1950	6
Exhibit Form 'H' in accordance with Shops Act 1950	6
Exhibit Form S.A.I. in accordance with Shops Act 1950	6
	18

MISCELLANEOUS PREMISES

Pet Animals Act, 1951

This is administered by the Inspector of the R.S.P.C.A. and five premises are registered by the Health Committee. One owner was prosecuted for failing to comply with the conditions of his Pet Shop Licence and was fined £20.

Riding Establishments Act, 1964

There are no persons holding a licence to set up a Riding Establishment in the Borough.

Animal Boarding Establishments Act, 1963

Two persons are licensed under this Act to run establishments. The two premises were subject to inspections during the year and were found to be satisfactory.

Rag, Flock and other Filling Materials Act, 1951

There are three premises on the Rag Flock Register. These were all visited during the year and no contraventions were noticed. Samples of Filling Materials were taken and all proved satisfactory.

Hostels

Redbourn Works Hostel, situated in Dawes Lane, has accommodation for 95 residents and there are 52 persons living in this hostel.

Caravan Sites and Control of Development Act, 1960

The number of vans on the Municipal Site at Manifold Road still continues to decrease. At the end of the year there were 7 vans compared with 25 the previous year. Six site inspections were carried out during the year and one caravan was inspected on the site.

The private site still operates with its maximum capacity of 60 caravans. Six inspections of the site were carried out and three caravans inspected on the site in connection with overcrowding and living conditions.

Rent Act, 1957

No certificates of disrepair were either issued or revoked during the year.

Scrap Metal Dealers Act, 1964

There were 30 dealers registered under the Act, 17 of which were itinerant collectors. Routine visits were made during the year to all scrap metal stores.

PUBLIC HEALTH ACTS 1936 and 1961 - NUISANCES

Details of Nuisances Abated and Improvements Effected

<u>Details</u>	<u>Informal Action</u>	<u>Formal Action</u>	<u>Total</u>
Nuisances from Animals and Birds	31		31
Nuisances from burning garden rubbish etc.	3		3
Water Closets repaired	30		30
Yards cleansed	8		8
Dustbins provided or replaced	108	1	109
Smells	35		35
Houses cleansed	6		6
Infestations cleared (other than Rats and Mice)	164		164
Indiscriminate dumping of refuse cleared	45		45
Foul Ditches	1		1
Drainage work carried out	13	8	21
Internal House Repairs	41	4	45
External House Repairs	10	1	11
General Housing Conditions	57		57
New sinks and Water supply	9		9
Domestic Blocked Drains cleared by Local Authority	1,320		1,320
Totals	1,881	14	1,895

Noise Abatement Act 1960

The department received 19 complaints of noise nuisance during the year, (12 domestic, 4 Commercial and 3 Industry). All complaints were found to be justified and were rectified after informal action by the department. The Commercial complaints necessitated late evening visits by the Inspectors.

<u>Commercial</u>	<u>No. of Complaints</u>	<u>Details of Complaints Received</u>
Clubs in residential areas	3	Loud music late in the evening.
Ice Cream Vans	1	Chimes and Bells disturbing shift workers.
<u>Domestic</u>		
	3	Noise from central heating system disturbing neighbours
	9	Complaints in respect of neighbours playing their T.V. Radiograms etc., too loudly.
<u>Industry</u>	3	Noisy mechanical pumps, drills, etc.

HOUSING

Number of new houses erected during the year:-

By the Local Authority.	64
By other Local Authorities.	Nil
By other persons or bodies.	109
Number allocated for replacing houses subject to Demolition Orders or otherwise demolished.	Nil

Inspection of dwelling houses during the year:-

Total number of dwelling houses inspected for housing defects (under Public Health Acts or Housing Acts).	156
Number of inspections made for the purpose.	360

Remedy of defects during the year without service of formal notices:-

Number of defective dwelling houses rendered fit in consequence of informal action by Local Authority Officers.	94
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Action under Statutory Powers during the year:-

1. Proceedings under Public Health Acts:-

(a) Number of dwelling houses in respect of which notices were served requiring defects to be remedied.	17
(b) Number of dwelling houses in which defects were remedied after service of formal notices.	8
(i) By Owners.	3
(ii) By Local Authority in default of Owners	5

2. Proceedings under Housing Acts:-

(a) Number of dwelling houses in respect of which notices were served requiring repairs.	8
(b) Number of dwelling houses which were rendered fit after service of formal notices.	5
(i) By Owners.	5
(ii) By Local Authority in default of Owners	Nil
(iii) Number of unfit houses purchased by Local Authority in accordance with Housing Acts.	1
(c) Number of Certificates of disrepair issued.	Nil

3. Slum Clearance - Proceedings under the Housing Acts:-

(a) Number of dwelling houses in respect of which Demolition Orders were made (Individual unfit houses only).	Nil
(b) Number of dwelling houses demolished in pursuance of Demolition Orders made (Individual unfit houses only).	Nil
(c) Number of dwelling houses or part subject to Closing Orders	4
(d) Number of dwelling houses included in confirmed Clearance Orders.	Nil

(e)	Number of dwelling houses or parts rendered fit by undertakings.	2
(f)	Number of dwelling houses demolished in pursuance thereof.	Nil
(g)	Total number of dwelling houses in which demolition orders are operative and which are still occupied except under the provisions of Sections 35 and 46 of the Housing Act 1957	Nil
(h)	Total number of dwelling houses occupied under Sections 34, 35, and 36 of the Housing Act 1957.	Nil
(i)	Houses demolished or closed voluntarily by Owners which would otherwise have been the subject of statutory action to secure demolition or closure.	Nil

4. Nissen Huts and similar Hutsments:-

(a)	Number still occupied :-	Nil
-----	--------------------------	-----

5. Estimated Number of Dwellings excluding those under Para 4. above remaining to be dealt with under:-

(a)	The Housing Act 1957 Sect: 16 and 18	Nil
(b)	The Housing Act 1957 Sect: 42	Nil

Number of Dwellings for which Applications for grants have been made:-

(a)	Standard Grant (Sect 8)	55
(b)	Improvement Grant (Sect 2)	413
(c)	Special Grant (Sect 13)	Nil

Number of Dwellings subject to grant :-

(a)	Standard Grant	
(b)	Improvement Grant	approx 6000
(c)	Special Grant	Nil

Number of declared General Improvement Areas 2

Number of Dwellings in these Areas 2010

Number of Dwellings included which qualify for:-

(a)	Standard Grants }	900
(b)	Improvement Areas }	
(c)	Special Grants	Nil

Housing Finance Act 1972, Parts III and IV Controlled and Regulated Tenancies:-

1. Applications for Qualification Certificates where dwelling does not have all standard amenities:-
 - (a) Number of applications pending as at 1st January, 1972 16
 - (b) Number of applications received during 1972 5
 - (c) Number of Provisional Certificates issued 11
 - (d) Number of Applications refused Nil
 - (e) Number of Applications pending at 31st December, 1972 10
2. Applications for Qualification Certificates where all Standard Amenities are provided :-
 - (a) Number of Applications pending at 1st January, 1972 58
 - (b) Number of Applications received during 1972 26
 - (c) Number of Applications refused 14
 - (d) Number of Applications pending as at 31st December, 1972 53
 - (e) Number of Qualification Certificates issued 17

SUB STANDARD HOUSES

Houses

The purchase of houses in the Earl Street/Beauchamp Street area as well as Trafford Street area continued, but at the end of the year a number of houses were still occupied. As blocks of houses empty, they are being demolished.

Complaints are received concerning the unsatisfactory appearance of these areas. Vandals break windows, break down doors and glass is strewn in the Street. There have been complaints of rats but the department has managed to keep this type of nuisance under control.

Two houses (70-72 Fox Street) were subjected to Closing Orders which were later revoked when the owner carried out repairs. Two further houses (16 North Street and 52 Beauchamp Street) were closed and the tenants rehoused.

The rehousing and demolition of houses in the Queen Street Clearance Area continued.

Water Supply

Four houses are without internal water supply - three have water pipes in adjacent wash-houses and one house is served by a spring (there is no water main within a reasonable distance of this house).

Sanitary Accommodation

The number of occupied houses without main drainage is as follows:-

1 house with pail closet.

20 houses with septic tanks.

11 houses with cess pools.

The number of houses with septic tanks diminishes as the houses in the Low Santon Terrace are closed and demolished.

HOUSES IN MULTIPLE OCCUPATION

A.	(i) Number of cases of overcrowding relieved during 1972	6
	(ii) Number of persons involved in such cases	39
B.	(i) Number of dwellings overcrowded at the end of the year...	2
	(ii) Number of families dwelling therein	5
	(iii) Number of persons dwelling therein.....	20

MULTI-OCCUPATION

A.	Number of houses on register at the end of the year	151
B.	Number of visits made for all purposes	329

C. Formal Action

Number of Management Orders served (Section 12)	1
Number of Directions to Prevent Overcrowding (Section 19) ...	1
Number of Notices requiring the Execution of Works (Section 15) Served	NIL
Number of Notices requiring the Execution of Works (Section 15) Abated	NIL

D. Informal Action

	<u>Served</u>	<u>Abated</u>
(i) To Cleanse	7	7
(ii) To provide hot water	2	2
(iii) To provide dustbins	6	6
(iv) To remove refuse	3	3
(v) For other facilities or defects	9	9
 Total	 27	 27

PREVENTION OF DAMAGE BY PESTS ACT 1949

Flying Bats

Two householders in different parts of the town suffered an infestation of Bats in their false roofs.

Successful treatments were carried out by the firm of rodent control contractors employed by the Council, to the utmost satisfaction of the complainants.

FACTORIES ACT 1961

Part I of the Act

1. Inspections for the purpose of provisions as to health (including inspections made by the Public Health Inspectors)

PREMISES (1)	NUMBER ON REGISTER (2)	NUMBER OF		OCCUPIERS PROSECUTED (5)
		INSPECTIONS (3)	NOTICES (4)	
(i) Factories in which Sections 1,2,3,4, and 6 are to be enforced by Local Authorities	15	7	1	-
(ii) Factories not included in (i) in which Section 7 is enforced by Local Authority	313	99	1	-
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding Out-Workers Premises).	19	19	-	-
TOTAL	347	125	2	-

2. Cases in which Defects were Found:-

PARTICULARS (1)	NUMBER OF CASES IN WHICH DEFECTS WERE FOUND					NUMBER OF CASES IN WHICH PROSECUTIONS WERE INSTITUTED (6)	
	FOUND (2)	REMEDIED (3)	REFERRED				
			TO H.M. INSPECTOR (4)	BY H.M. INSPECTOR (5)			
Want of Cleanliness	S.1	2	2	-	-	-	
Overcrowding	S.2	-					
Unreasonable Temperature	S.3	-					
Inadequate Ventilation	S.4	1	1	-	-	-	
Ineffective Drainage of Floors	S.6	-					
<u>Sanitary Conveniences</u>	S.7	-					
(a) Insufficient		-					
(b) Unsuitable or Defective		1	-	-	-	-	
(c) Not Separate for Sexes		-					
Other Offences Against the Act (not including Offences relating to Outwork).		-					
	4	3	NIL	NIL	NIL		

PART VIII OF THE ACT

Section 133 and 134:

Section 133: Number of out-workers in August list required by Section 133 (1) (c):-

Making Wearing Apparel 1

Section 134: -

Poultry Inspection

- (i) Number of poultry processing premises within the District 1
- (ii) Number of visits to these premises 7
- (iii) Total number of birds processed during the year 80,000
- (iv) Types of birds processed during the year:-
 - Hens
 - Broilers
 - Capons
- (v) Percentage of Birds rejected as unfit for human consumption 3%
- (vi) Weight of poultry condemned as unfit for human consumption 7,200 lbs
- (vii) The general condition and layout of the premises is good and the standard of poultry hygiene is very satisfactory. Unsound birds are rejected by the "spotting method" and certificates are issued on request after examination of the rejected birds by the Meat Inspector.

PUBLIC CLEANSING

Collection

Attempts by the Works Study Officer to settle a satisfactory bonus scheme were not concluded by the end of the year.

In the latter part of the year, the regularity of collection was not maintained.

Disposal

The method of tipping refuse continues to receive international acknowledgement with visitors from Japan, Spain, Australia, New Zealand and America.

The Chief Public Health Inspector was invited to visit Bilbao in Spain to discuss their tipping problems before and after a pre treatment plant had been installed.

Salvage

The Chief Public Health Inspector was interviewed on the B.B.C. programme "Nationwide". This resulted in many letters from all over Britain asking for further information.

Civic Amenities

During the year the following was recorded:-

Abandoned cars brought in for disposal	83
Miscellaneous calls to collect bulk items of household refuse	3636
Visits by the general public to the depot to deposit rubbish (Saturdays and Sundays)	4512

The practice of manning the depot on Saturdays and Sundays from 10 a.m. to 3 p.m. has proved a great success.

Despite the facilities available, both for collection and disposal, indiscriminate tipping still takes place.

The land that had been tipped for many years with crude refuse has been released to industry. Roads have been partially made and this has meant a second access to the refuse tip. Many people have been too idle to take their refuse to the tip face and have dumped it on the approach roads.

TABLE 1 - MAN POWER AS AT 31st DECEMBER, 1972

<u>SERVICE</u>	<u>DESIGNATION</u>	No. 1972
Refuse Collection	General Foreman Drivers Spare Drivers Carriers	1 13 1 34
Miscellaneous Collection	Driver/Collector	1
Salvage Collection	Drivers Mates	4 5
Refuse Plant	(1) Foreman (2) Chargehand (3) Weighman (4) Hopperman (5) Refuse Sorters (6) Tin Baler Operatives (7) Incinerator Operative (8) Paper Salvage Operatives (9) Fork Lift Driver (10) Pool Labourers	1 1 1 1 4 2 1 5 1 3
Refuse Disposal Tip	(11) Driver - Fiat Tractor (12) Pulverised Refuse - Driver	1 1
Depot Cleansing - Mess Room, Toilets	Cleaner - Male W/T Cleaners - Female P/T	1 2
	Total	84

TABLE II - VEHICLES AS AT 31st DECEMBER, 1972

NO.	SERVICE	REG. NO.	MAKE	TYPE	CAPACITY	YEAR
1.	Collection	21 GBE	S.D.	T.N. Pakamatic	20 c.y.	1964
2.	"	BBE 277B	S.D.	" "	20 c.y.	1964
3.	"	HFU 396D	Karrier	Ramillies	35 c.y.	1966
4.	"	HFU 810D	"	"	35 c.y.	1966
5.	"	JBE 133E	S.D.	T.N. Pakamatic	20 c.y.	1967
6.	"	LFW 233F	S.D.	T.B.N. Pakamatic	20 c.y.	1967
7.	"	MFU 988F	S.D.	TY Pakamatic	20 c.y.	1968
8.	"	OFU 314G	S.D.	TBZ Pakamatic	37 c.y.	1968
9.	"	RBE 204G	S.D.	" "	37 c.y.	1969
10.	"	UFW 327J	S.D.	TBZ Bulk Container		
11.	"	WFU 971J	Dennis	Bin lift	20 c.y.	1970
12.	"	YFW 267K	"	Paxit Bulk Container	35/40 c.y.	1971
13.	"	DFU 332L	S.D.	Bin Lift	35/40 c.y.	1971
				Paxit	50 c.y.	1972
1.	Reserve Collection	658 CBE	S.D.	Pakamatic	50 c.y.	1962
2.	Reserve Collection	DFU 133C	Karrier	Ramillies	20 c.y.	1965
1.	Misc. Collection	480 EFW	Karrier	Open Dropside Lorry	10 c.y.	1963
2.	" "	DFU 957C	"	Van	16 c.y.	1965
1.	Paper Salvage Collection	NFU 475F	Karrier	Van	16 c.y.	1968
2.	Paper Salvage Collection	SFU 674H	Karrier	"	16 c.y.	1969
3.	Paper Salvage Collection	XFU 815K	Ford	"	16 c.y.	1971
4.	Paper Salvage Collection	YBE 556K	"	"	16 c.y.	1971
1.	Refuse Disposal	EBE 298C	Ford	2000 Tractor		1965
2.	" "	FFU 421D	"	" "		1966
3.	" "	Not Reg.	Fiat	Tractor Shovel	14 c.y.	1971
4.	Pulverised Refuse Tip Lorries	" "	Leyland Ex W.D. Hippo	Open Lorry	50 c.y.	1972
5.	Pulverised Refuse Tip Lorries	Not Reg.	Leyland Ex W.D. Hippo	Open Lorry	50 c.y.	1972
1.	Paper Salvage	Not Reg.	Montgomerie	Fork Lift Truck		
2.	" "	Not Reg.	Reid Electric		15 cwt.	1966
			Coventry	Fork Lift Truck		1971
			Climax			
			Diesel			
1.	Depot	Not Reg.	KEF	Pedestrian Controlled Sweeper		1964

TABLE III - WEIGHT OF REFUSE COLLECTED

<u>YEAR</u>	<u>TONS</u>	<u>LOADS</u>	<u>BINS COLLECTED</u>
1963	15,448	11,342	1,286,141
1964	17,364	11,290	1,361,137
1965	17,848	11,307	1,402,557
1966	17,668	10,566	1,316,819
1967	18,632	11,075	1,338,180
1968	18,832	10,852	1,355,557
1969	19,137	10,746	1,382,487
1970	19,501	11,094	1,525,347
1971	20,673	10,770	1,612,279
1972	21,815	11,149	1,525,610

TABLE IV - MISCELLANEOUS COLLECTIONS

A total of 3,646 separate collections of bulk refuse (Furniture, Bedsteads, Cookers and Refrigerators etc.) were made from householders during the year.

Refuse direct to Tip - Brick Rubble, Soil, Street Sweepings etc. brought in by other Corporation Departments amounted to 4,800 tons.

TABLE V

ANALYSIS OF SALVAGE SALES PERIOD 1962 - 1972
WEIGHTS AND VALUES

YEAR	PAPER		TEXTILES		BALED BINS		SCRAP METAL		TOTALS	
	TONS	£	TONS	£	TONS	£	TONS	£	TONS	£
1962	1212	10498	25	308	8	14	15	176	1260	10996
1963	1238	10480	19	280	-	-	9	159	1266	10919
1964	1246	10791	17	406	-	-	28	139	1291	11336
1965	1946	13906	22	306	-	-	32	406	2000	14618
1966	1904	17889	108	1406	830	3320	44	409	2886	23024
1967	1683	15538	154	1251	808	3369	123	397	2768	20555
1968	1654	16229	156	1007	529	2496	374	927	2713	20659
1969	1707	18493	159	1043	611	3464	117	1015	2594	24015
1970	1595	18260	158	1687	698	4018	190	2175	2641	26140
1971	1375	15725	209	1508	664	3404	264	1631	2512	22268
1972	1547	17447	187	1550	487	2182	172	852	2393	22031
TOTALS	17107	165256	1214	10752	4635	22267	1368	8286	24324	206561

PUBLIC CONVENIENCES

The Central Toilets near to the Market Area are in excessive use on market days, despite the nearness of temporary toilets. This has lead to the Health and Markets Committee agreeing to the existing toilets to be practically doubled in size by the use of buildings at the rear.

It was interesting to note that someone writing a book on the subject of Public Conveniences gave top rating to the Central Toilets.

The need for suitable accommodation for the disabled is also in mind, two toilets are already provided with facilities and plans were made for the third set to be installed at the Britannia Corner.

Because of the age limit on manual workers, it was necessary to reorganise the toilet attendants.

A mobile team has been created consisting of three men (two on duty and one off.) A Van is used to transport them around to clean both male and female toilets. It was realised that the cleaning of female toilets by male personnel could be a delicate subject, so the female toilets are well 'sign posted' "Men Cleaning" when this is so. It is however necessary to put female attendants in the Central and Britannia Corner toilets on Fridays and Saturdays.

It is possibly of interest to note that the 40 hour week of the Driver/Cleaners departs from the usual 8 hour day - five day week and comprises of a 10 hour day - four days per week. This appears to be a satisfactory solution to the always difficult problem of manning rotas.

The following is a list of conveniences as at 31st December, 1972:-

<u>Situation</u>	<u>Accommodation for Females</u>	<u>Disabled Persons</u>	<u>Accommodation for Males</u>	
1. Central - Market Square	4 W.C.'s	1 W.C.	3 W.C.'s	1 Urinal
2. Mobile Toilets Market Square Open Fridays and Saturdays only	4 W.C.'s	-	-	-
3. Britannia Corner	8 W.C.'s		3 W.C.'s	2 Urinals
4. Dunstall Street Car Park	2 W.C.'s	1 W.C.	1 W.C.	1 Urinal
5. Queens Gardens Ashby Road	4 W.C.'s		3 W.C.'s	1 Urinal
6. Cottage Beck Road	3 W.C.'s		2 W.C.'s	1 Urinal
7. Ashby Turn/Burrringham Road	3 W.C.'s		2 W.C.'s	1 Urinal
8. Ashby High Street/Car Park	3 W.C.'s		2 W.C.'s	1 Urinal

C PERSONAL HEALTH AND WELFARE SECTION

MATERNITY AND CHILD HEALTH SERVICES

By the employment of General Practitioners on a sessional basis for four sessions per week in addition to the full-time staff of the Department, the above services were maintained during 1972 at the high standard already set.

Dr. Bell, Consultant Paediatrician at Scunthorpe General Hospital, continued to hold two weekly sessions, one at Parkinson Avenue and the other at Ashby.

The table which follows details the attendances at all the clinics during 1972. The total number of attendances made, 30,106 shows a decrease of 9% on the 33,035 attendances made in 1971.

The sessions for taking blood samples from expectant mothers was discontinued at Parkinson Avenue, as there was no longer any demand for this service from the general practitioners.

Relaxation classes for expectant mothers were held at Parkinson Avenue, Ashby and Riddings. 81 mothers made 345 attendances at the 48 sessions held at Parkinson Avenue, 118 mothers made 609 attendances at the 49 sessions held at Ashby and 63 mothers made 342 attendances at the 45 sessions held at Riddings. In all 1,296 attendances were made at these classes in 1972, compared with 1,302 in 1971.

Student Nurses doing obstetrical training at the Maternity Home attended the relaxation and mother-craft classes as observers.

"Toddlers" sessions, to which mothers are encouraged to bring their young children for 'birthday' medicals and routine check-ups, were held at Ashby, Parkinson Avenue and Riddings. Altogether 797 toddlers were seen at 100 sessions. 589 of the toddlers were given a 'clean bill of health', 133 were referred to their General Practitioner or the relevant Consultant, and 75 were kept 'under observation' for some minor defect, not requiring treatment.

Midwives' Ante-natal clinics continued to be held on Tuesday afternoons at Parkinson Avenue for expectant mothers who find it more convenient to be examined in a clinic than at home. 43 attended for a total of 334 pre-natal examinations and 1 attended for a post-natal examination.

INFANTS ATTENDING CHILD HEALTH CLINICS DURING 1972

Clinic	Number under one at first attendance							Number of attendances during year made by children who were born in:												
	72	71	70	69	68	67	66	72	71	70	69	68	67	66						
Ashby	371	351	386	185	61	45	13	2	1043	3507	3379	558	168	95	64	2	7773	188	41.3	1464
Brumby	81	72	91	44	29	13	5	7	261	736	883	201	94	48	28	16	2006	50	40.1	379
Berkeley	90	80	110	52	25	19	7	1	292	1197	1295	276	169	182	55	1	3175	52	61	311
Parkinson Avenue	423	355	311	138	63	39	11	-	917	2888	2614	550	217	122	36	-	6427	188	34.1	1271
Riddings	254	215	255	133	56	46	15	-	720	2414	2780	537	221	140	88	-	6180	100	61.8	1412
Westcliff	229	197	182	106	62	38	18	1	604	2156	1459	443	260	166	54	7	4545	98	46.3	948
Total	1448	1270	1335	658	294	200	69	11	3837	12898	12410	2565	1129	753	325	26	30106	676	44.5	5785

WELFARE FOODS SERVICE - DISTRIBUTION

	National Dried Milk	Vitamin Drops	Vitamin A & D Tablets	Orange Juice
Parkinson Avenue Clinic	2609	432	154	436
Ashby Clinic	1232	664	172	672
Riddings Clinic	875	413	76	308
Berkeley Clinic	369	183	33	204
Westcliff Clinic	548	312	71	211
Brumby Clinic	148	50	5	56
	5781	2054	511	1887

Total receipts during the period January 1st, 1972, to 31st December, 1972, amounted to £1,356.03. The above figures are inclusive of free issues.

ASCERTAINMENT OF DEAFNESS IN CHILDREN

In view of the importance of the early diagnosis of deafness, routine screening tests were introduced in October 1971 and continued to be held during 1972.

All babies at the age of 7 months are now screened, and the tests are conducted at the Child Health Clinics in Scunthorpe, by Health Visitors specially trained in this field. The number of children seen by the end of the year was 1125.

Children found to have defects are at first retested in approximately two months and those who still show a hearing loss are referred to the clinic doctor, and then if necessary, are referred to the Ear, Nose and Throat Specialist.

PREMATURE BABY SERVICE

A premature baby is defined as one weighing $5\frac{1}{2}$ lbs or less at birth. As the birth weight is made the sole criterion of prematurity, it is likely that some full-term infants of low birth weight due to defective intrauterine nutrition are included in the return and it is possible that some infants of short gestational period are excluded.

69 premature babies were born in Scunthorpe in 1972, as compared with 70 in 1971. All were born in the hospital except for 1, transferred later to the hospital.

Of the 69 premature babies, 7 died. 4 babies were between 2 lb 3 oz and 3 lb 4 oz; 2 died within 24 hours of birth. 17 babies were between 3 lb 4 oz and 4 lb 6 oz; 3 died within 24 hours and 1 died between the 1st and 7th day. 16 babies were between 4 lb 6 oz and 4 lb 15 oz and all survived. 32 babies were between 4 lb 15 oz and 5 lb 8 oz all survived except for 1 baby who died after the 7th day.

THE "AT RISK" REGISTER

The "At Risk" Register, started in 1963, represents all those children who are known to have a slightly greater risk of showing some deviation from the normal in their development than other children who have not been brought particularly to the notice of the Health Department. Health Visitors keep an especially watchful eye on these children and their progress is reviewed at regular intervals. If, with the passage of time, the developmental milestones which were at risk are successfully passed, the children are removed from the register. If a definite handicap is diagnosed, registration of that fact is made, but they are still maintained on the "At Risk" Register, as it is unfortunately true that a child with one definite handicap is more likely to have another than a child about whom no information is available.

At the start of 1972, 939 children were on the register, 432 were added during the year, 260 were removed from the register following check-up and another 84 could not be traced, probably because they had left the area. 59 were transferred to the School Health Section and 12 children died. Thus at the end of the year there were 956 children on the "At Risk" Register.

MIDWIFERY SERVICES

The trend towards having all confinements occur in hospital continued during 1972. At the beginning of the year 4 full-time and 1 part-time midwives were employed. This establishment continued throughout the year.

These midwives attended 12 mothers at their home confinements, as compared with 24 in 1971. At none of these home confinements was a doctor present at the birth.

The care of the mothers required 136 home visits. In addition, 5,889 home visits were paid looking after the 920 mothers - as compared with 1,020 mothers in 1971 - who, having had their babies in hospital, returned home before the tenth day.

The ante-natal care of the mothers required 1,143 visits to the homes of patients, 447 social visits were paid to see whether home conditions were suitable for home confinement and 1,447 other visits were found necessary in the course of providing the service. Thus a total of 9,062 home visits were made by the Borough midwives in 1972. This is a decrease of 332 from the 9,394 home visits made in 1971, a fall of 3.5%

HEALTH VISITORS

During 1972, Local Authority Nursing Services were reorganised in accordance with the recommendations of the Mayston Report, and in consequence, two Health Visitors were appointed to administrative positions.

There was one resignation during the year, and at the end of the year, seven full time and five part time Health Visitors were 'in post', giving a whole time equivalent of 9.5 out of an establishment of 17.

Health Visitors were informally attached to all the large group practices in the town, and to some of the non-group practices.

In addition to their duties in the Maternity and Child Health Clinics, the Health Visitors paid the following home visits during the year.

<u>Type of Case</u>	<u>No. of Visits</u>
Children under 1 year	2,476
Children 1 - 5 years	7,745
School Children	1,272
Persons between 17 - 64	530
Households visited due to Tuberculosis	10
Households visited due to other infectious diseases	31
Visits made to Mentally Handicapped persons	41
Visits made to Mentally Ill persons	38
Households visited for any other reason	1,296
Total number of visits	13,439

This represents a fall of 15% from the 15,786 visits paid in 1971.

GERIATRIC VISITORS

No change occurred during 1972 in the organisation in Scunthorpe of this scheme, first outlined in the Socialist Commentary of January, 1966, as part of a comprehensive survey of future social policy for our old people. The Borough Council approved the introduction of the scheme of Geriatric Visitors but the County Council would not approve it and only allowed it to be started provided any Geriatric Visitors so appointed were held against any unfilled Health Visitors establishment post. The scheme started with one part-time nurse and has now quite rapidly expanded until there are now six qualified nurses, all part-time, operating the scheme. These nurses work in co-operation with the General Practitioners in the town and take their case-loads from the General Practitioners. They do not overlap practices but one Geriatric Visitor usually works with more than one practice except in the case of the large group practices. The visitors maintain contact on behalf of the doctors with the old people in the practice. They also ensure that the older patients obtain various social and welfare services when they are required. During the year these visitors paid 2,772 visits to the homes of old people. This is a slight decrease on the 2,834 visits they paid in 1971.

182 new patients were added to the visiting lists of the Geriatric Visitors during 1972 and at the end of the year 972 males and 848 females were being visited.

During the year 65 geriatric patients (16 males, 49 females), were admitted to Convalescent Homes for an average period of two weeks duration.

GERIATRIC VISITORS

The following table summarises the work done by the Geriatric Visitors during the year. The letters A, B, C, D, E & F are used to indicate each of the six Geriatric Visitors.

	A	B	C	D	E	F	TOTAL
Male	70	101	69	15	61	56	372
Female	139	234	145	19	182	129	848
No. of Patients	209	335	214	34	243	185	1220
No. in O.A.P. Accommodation	73	90	54	10	79	47	353
No. in Private and Rented Accommodation	104	151	99	22	143	76	595
No. in Council Houses	32	68	58	2	21	59	240
No. in Part III Accommodation	-	26	3	-	-	3	32
No. Living Alone	81	137	67	13	98	86	482
New Patients on Visiting List	36	66	18	3	37	22	182
No. of Patients who died during year	19	29	5	4	15	14	86
No. of Patients who Moved Away during year	7	1	2	1	3	3	17
Age Distribution of Patients							
50+	-	-	6	-	-	-	6
60+	57	42	62	4	53	33	251
70+	102	178	100	15	113	74	582
80+	44	104	142	10	70	69	339
90+	5	11	4	5	7	9	41
100+	1	-	-	-	-	-	1

HOME NURSING SERVICE

The equivalent of 17 full-time Home Nurses were busily employed throughout the year. On 1st January, 1972, 397 cases were being nursed and 1,221 new cases came under treatment during the year.

Of the new cases 538 were medical, 683 were surgical. Of all the cases nursed, 85 were under five years old, 717 between 5-64 years old, and 419 were over 65 years old.

The care of these patients required 61,065 visits by the Home Nurses during 1972, compared with 51,949 during 1971, an increase of 17.5%.

BATHING SERVICE

This service is ancillary to the nursing service. During 1972 the Bathing Attendants made 4,855 visits, as compared with 4,402 visits in 1971, an increase of 9.3%.

THE ESSENTIAL LAUNDRY SERVICE

This service is also complementary to the Nursing Service, in that it provides for the issue, collection and laundering of drawsheets as required on the recommendation of any doctor or an officer of the Health Department. 356 cases used the service in 1972, compared with 339 cases in 1971, an increase of 5%. 306 users of the service were 60 years of age or over and in 84 cases the service was required for over three months.

LOAN OF NURSING EQUIPMENT

This service provides for the loan of certain items of nursing equipment for the use of patients being nursed at home.

Major items of equipment issued included: 29 hospital-type bedsteads, 84 commodes, 62 dunlopillo mattresses, 20 self-lifting poles, 28 cot sides, 5 pulleys, 7 ripple machines, 90 wheelchairs and 11 fracture boards.

8,600 incontinence underpads were issued during 1972 at a cost of £190.

TUBERCULOSIS

The situation with regard to this disease remained satisfactory during 1972. The number of cases on the Borough register fell by 35. There were three deaths from pulmonary tuberculosis amongst people on the register, and there was one death from non-pulmonary tuberculosis of a person not on the Borough register.

As recommended in the Ministry of Health Circular 64/50, all persons appointed by the Local Authority to work with children are examined and x-rayed to limit the danger of infection to children. During the year a total of 84 teachers/student teachers were so examined.

Extra nourishment was supplied during the year to two females and three males on the Borough register. Extra nourishment supplied was in the form of milk and eggs to supplement the patient's diet.

Tuberculin Test and B.C.G. Vaccination

<u>Contacts</u>		<u>Schoolchildren</u>	
No. skin tested	48	No. skin tested	1039
Found positive	-	Found positive	29
Found negative	48	Found negative	1010
Vaccinated	48	Vaccinated	1010
Babies vaccinated at birth	20		

TUBERCULOSIS

	NEW CASES			CASES ON BOROUGH REGISTER			DEATHS		
	Respiratory	Non Respiratory	Total	Respiratory	Non Respiratory	Respiratory	Non Respiratory	Total	
1963	19	4	23	246	27	-	1	1	
1964	13	4	17	250	28	1	-	1	
1965	19	2	21	264	29	1	-	1	
1966	15	-	15	211	29	2	-	2	
1967	19	4	23	234	34	2	-	2	
1968	7	-	7	225	35	2	-	2	
1969	9	2	11	205	36	1	-	1	
1970	11	3	14	200	38	-	1	1	
1971	4	3	7	195	40	2	-	2	
1972	7	-	7	175	25	3	1	4	

TUBERCULOSIS 1972

Age	NEW CASES				DEATHS			
	Respiratory	Non Respiratory						
0-	-	-	-	-	-	-	-	-
5-	-	-	-	-	-	-	-	-
10-	-	1	-	-	-	-	-	-
15-	-	1	-	-	-	-	-	-
20-	-	-	-	-	-	-	-	-
25-	-	-	-	-	-	-	-	-
35-	1	2	-	-	-	-	-	-
45-	2	-	-	-	-	1	-	-
55-	-	-	-	-	1	-	-	-
65 & over	-	-	-	-	1	-	-	1

TUBERCULOSIS 1972

Respiratory				Non Respiratory				Grand Total
Males	Females	Children	Total	Males	Females	Children	Total	
No. of cases on T.B. Register 31.12.71								
Transferred in from other areas during the year								
Transferred from child to adult	-	2	-2	-	-	-	-	-
New cases notified during the year	3	3	1	7	-	-	-	7
	114	77	12	203	18	18	4	243
No. of cases written off register:								
(1) Recovered	1	5	-	6	1	1	1	9
(2) Removed to other areas	-	3	-	3	1	-	-	4
(3) Re-diagnosed	-	-	-	-	-	-	-	-
(4) Lost sight of	6	4	2	12	5	3	9	1
(5) Deaths from T.B. from other causes	2	1	-	3	-	-	-	3
	3	1	-	4	-	2	-	6
Total	12	14	2	28	7	6	2	43
No. of cases on T.B. Register 31.12.72	102	63	10	175	11	12	2	200

CERVICAL AND BREAST CANCER SCREENING SERVICE

During 1972, 122 clinic sessions were held in Ashby Clinic for the provision of this service. 1039 women attended for examination, compared with 1,144 in 1971. Of these, one was found to be a positive case of carcinoma of the cervix, giving a discovery rate of 0.1%; which may be compared with a rate of 0.26% in 1971, 0.09% in 1970, and 0.45% in 1969. Another case was found to be sufficiently suspicious to be referred for further investigation. In 17 cases a mild infection was discovered and referred for treatment, and in 65 cases local and minor conditions discovered at the examination were made known to the General Practitioners of the patients concerned.

Cytology Sessions held at Ashby Clinic 1972

No. of Attendance	No. Found Atypical	Carcinoma in situ	Suspicious	Trichomonas/ Candida	Others	
					Negative	Negative with other conditions
1039	-	1	1	17	1020	65

THE MARIE CURIE MEMORIAL FOUNDATION

AREA WELFARE GRANT SCHEME

The above scheme is organised by the Marie Curie Memorial Foundation on a National scale so that help 'in kind' may be given to necessitous cancer patients immediately the need is apparent and without any administrative delay. The scheme is operated locally by the Medical Officer of Health and the Superintendent Nursing Officer, who are given block grants of money for distribution as considered necessary. The Medical Officer of Health acts as the agent of the Foundation through an imprest account to be used at his discretion and accounted for retrospectively.

No expenditure was required under this scheme during 1972.

The "Day and Night Nursing Service" of the same Foundation allows nursing care to be provided at home during emergency periods. It is designed to allow relatives to obtain adequate rest periods from their nursing responsibilities when, for example, a cancer patient is awaiting admission to hospital, or during the terminal stages of the disease.

During 1972, £91.60 was expended in supplying this service in Scunthorpe.

HAEMODIALYSIS IN THE HOME

There were no new cases of Scunthorpe citizens requiring haemodialysis in their own home during 1972.

VACCINATION AND IMMUNISATION

The campaigns for the immunisation of as many susceptibles as possible against diphtheria, whooping cough, tetanus, poliomyelitis, measles, rubella and tuberculosis, at the times when immunisation is likely to be of maximum benefit and least likely to produce adverse side effects, were continued in Scunthorpe during 1972 in accordance with the recommendations of the Department of Health and Social Security.

The numbers of persons immunised showed a satisfactory increase over the numbers immunised in 1971, except in two cases. In the case of measles a slightly lower total number of cases were immunised, but a larger number than in 1971 received their immunisations at the best time, when between one and two years old. In the case of smallpox it was only to be expected that there would be a large drop in the number of children vaccinated, as vaccination against smallpox ceased to be recommended by the Department of Health and Social Security.

VACCINATION OF TRAVELLERS

International Requirements

During the year a total of 522 vaccinations were given by the Staff of the Department to persons travelling abroad as follows:-

CHOLERA VACCINATION	81
T.A.B. VACCINATION	46
SMALLPOX (PRIMARY) VACCINATION	82
SMALLPOX REVACCINATION	313

Vaccinations are given free of charge at the Health Department between 4.00 p.m. and 5.00 p.m. daily, vaccine for T.A.B. and Cholera being obtained on prescription from the patient's Medical Practitioner.

VACCINATION AND IMMUNISATION

Primary Immunisation of Persons under 16

Type of Vaccine	Under 1	1 yr.	2 yrs.	3 yrs.	4 yrs.	5-9	10-15	Total
Diphtheria	-	-	1	-	-	-	-	1
Diphtheria/ Tetanus	-	3	11	3	3	56	1	77
Tetanus	-	-	3	-	5	21	171	200
Triple: Diphtheria/ Pertussis/Tetanus	-	498	346	28	14	12	-	898
Poliomyelitis: Sabin	-	493	367	29	23	79	34	1025
Measles	1	303	247	34	25	95	1	706

Reinforcing Immunisation of Persons under 16 years

Type of Vaccine	Under 1	1 yr.	2 yrs.	3 yrs.	4 yrs.	5-9	10-15	Total
Diphtheria	-	-	-	-	-	-	10	- 10
Diphtheria/ Tetanus	-	-	1	1	79	713	18	812
Tetanus	-	-	1	1	3	28	755	788
Triple: Diphtheria/ Pertussis/Tetanus	-	2	5	2	15	78	3	105
Poliomyelitis: Sabin	-	6	8	4	97	758	716	1589

Smallpox Vaccination

	Under 1	1-2 years	2-4 years	5-15 years	Total
Primary Vaccination	2	10	20	40	72
ReVaccination	-	-	-	42	42

Rubella

13 yrs.	14 yrs.	15 yrs.	16 yrs.	17 yrs.	18+	Total
305	261	63	44	25	9	707

HEALTH EDUCATION

A new Health Education Officer was appointed on 1st January, 1972. Her first task was to contact allied colleagues, both official and voluntary in the town. In many instances this was a matter of renewing old relationships as she had worked previously in the Borough as Mental Welfare Officer (1965 to 1968).

Throughout the year as funds would permit a stock of capital and running equipment was built up and a beginning was made in designing and printing leaflets to the Health Department's specifications. A pet hygiene display was made to order for use in schools and clinics and this was borrowed by the Community Development Officer for one of his projects.

In Scunthorpe Borough, health education is largely carried out by the officer involved being responsible for his own particular section, say dentistry or chiropody. As the Health Visitors and Health Education Officer are close colleagues, much work is done jointly in schools and clinics.

In May the Health Education Officer was interviewed at Leeds University and accepted to read the Diploma in Health Education. She was seconded for an academic year in October which meant that full-scale plans had to be deferred until August 1973.

A Technical Assistant was appointed in May 1972 to act as projectionist to the Health Visitors and to take films on subjects requested by the Health Visitors. We are particularly grateful to Brumby Wood Maternity Home for allowing several films of a birth of a baby to be taken. Every facility was offered by the matron and the duty sisters were most co-operative.

The Health Education Officer was co-opted on to the Home Safety Committee and attended six committee meetings and two at regional level. Publicity was supplied by the Health Department at the Home Safety display on Family Day in June. The Technical Assistant was co-opted on to the Home Safety Committee when the Health Education Officer was seconded to Leeds.

The job of ordering publicity and films was taken over by the Technical Assistant.

Before being seconded to Leeds the Health Education Officer attended the Health Education Council Conference in York in April, the Marie Curie Cancer Symposium in London in May, a one day Bell and Howell projectionist course in July and the Inter-Narvex Exhibition in July. Help and advice was sought and freely given by Health Education Officers in Lincoln, Lindsey, Wakefield, Boston, Sheffield and Bradford.

The Health Education Officer's first work in schools was to co-operate with Mrs. Welch, Health Visitor who had planned a comprehensive programme throughout the winter term for Thomas Sumpter Secondary School. High Ridge was contacted and two talks with films were given at High Ridge Secondary School during the autumn term. Together with the Rev. Butterworth plans were laid down for a two-term programme for the Social Studies of John Leggott Sixth Form College on health and allied topics which involved many outside speakers. The first two talks were taken by the Health Education Officer. It is hoped that health education will be extended to primary schools next year.

Miscellaneous bodies (Red Cross, W.I. etc.) are showing an interest in health education and eight talks and film shows were given during the year. Plans are to be made next year with the Community Development Officer for more health education to be given in the community centres.

We are grateful to Lindsey for the use of the film "Barnet". At two clinics the mothers-to-be requested that this Swedish film on the birth of a baby should be shown one evening to their husbands. One was so impressed that he witnessed the birth of his child.

In addition to the work carried out by the Health Education Officer, a varied programme of Health Education talks and lectures was given by other members of the staff.

The Medical Officer of Health gave 4 lectures to different groups of nurses and the Health Visitors gave a total of 369 talks and teaching sessions during the year.

Of the teaching sessions 259 were conducted at the Maternity and Child Health Centres, 57 at schools, 43 in G.P. premises and 7 at the Hospital, and 13 talks were given to various voluntary societies within the Borough.

The Area Nursing Officer conducted three examinations and gave three courses of lectures to nurses in training during the year. She also gave 13 talks to various voluntary groups and clubs in the Borough.

Many visits to the Refuse Disposal Plant and Abattoir were arranged by the Public Health Inspectors. They also gave 30 lectures. 14 were given at local colleges and schools, and six to voluntary organisations.

Attention has again been paid during the year to warning against the danger of smoking. Pamphlets and advertising matter both on this subject and that of Cervical Cytology have been distributed. These and certain other themes have also been emphasised by displays both in the Health Department and focal points within the Clinic buildings.

CHIROPODY

Three chiropodists supplied this service during 1972.

Compared with 1971, when 9,739 treatments were given to 2,185 patients, 10,007 treatments were given to 2,052 patients. On average, each patient was given 4.9 treatments during the year, compared with 4.5 in 1971 and 4.1 in 1970.

557 of the treatments were given at the Lindsey County Council Old Peoples Homes, 6,909 were given at the Borough Clinics and 2,541 were given at the homes of those patients unable to travel to the clinics. The great majority of patients were elderly, but others included 103 physically handicapped, 12 expectant mothers and 1 mentally subnormal person.

Geriatric Day and Short Stay Centre
297 Ashby High Street

Day Centre

The Geriatric Day Centre operated on 203 days during 1972, and the attendance figure for this period was 4,156.

This figure shows an increase of 528 when compared with 1971, and is the result of the extension of the service from 4 days to 5 days with effect from 13th September, 1972.

During the year the waiting list of 27 persons was reduced and by the end of the year there were no persons waiting for admission. As in 1971 there is still a preponderance of females attending the centre and the average age has remained at approximately 80 years. Four members are in their nineties.

The activities provided at the centre continued as in previous years and visits to the Civic Theatre were made on three occasions, once to the Annual Pantomime and twice to see an Old Tyme Music Hall production.

The continued value of the two Borough Ambulances was further demonstrated when they were used to provide transport for day trips to Cleethorpes. In addition members were driven to Normanby Park and on a trip to the Rhodedendron woods.

During the year a Jumble Sale was held and this, coupled with the Annual Garden Party held in the spacious gardens at Sandfield House, helped to provide the extras on the summer outings. The patients themselves donate gifts as prizes for their own raffles, the proceeds of which also help to provide for these extras.

The years activities were brought to a very successful conclusion when the St. Hugh's Mothers Union Choir visited the Centre and sang Carols with the patients.

One sad note that has to be recorded is that of the illness of Mrs. F. Revell who right from the conception of the Day Centre has given unstinting and valued service to the department in her capacity of Nurse-in-Charge. Since her illness in November both the staff and particularly the patients have greatly missed her cheerful enthusiasm and the friendly understanding which she displayed at all times.

Short Stay Residential Centre

The Centre using the upstairs accommodation of the premises which also house the corporation Geriatric Day Centre, was officially opened by His Worshipful the Mayor, Councillor W. Wilkinson on the 6th September, 1972. Since this time a total number of 27 persons have been received for on average a stay of two weeks.

This Centre is a joint venture between the Borough Council and the Scunthorpe Branch of Age Concern and is administered by a Management Committee of representatives from the two concerns.

Admission is broadly restricted to those persons of pensionable age who are capable of getting up and down stairs.

The aim of the Centre is to enable elderly people to enjoy short stay holiday periods in the comfortable, well appointed surroundings of Sandfield House which has excellent recreational facilities. It provides a holiday in different surroundings without the need for long travel and provides relief for families, who, through commitment to elderly relatives, have been unable to take a holiday themselves. Some charges are made to those who can afford to pay but inability to pay does not prevent a person from using the facilities.

During the planning and actual operating period of the Centre many generous gifts and donations have been made by persons of all ages and backgrounds and it is worth noting that the interest of both the citizens and the various societies and clubs in Scunthorpe have played a vital role in the continued maintenance and success of this project.

Persons wishing to avail themselves of this scheme are selected after referral by the Medical Officer of Health. Many of the referrals have initially been received from four sources viz Health Visitors, Geriatric Visitors, Nursing Staff and members of Age Concern.

HOUSING WELFARE

The year's work has been interesting and rewarding. Pressure of work has however been exceedingly heavy. The normal day to day business of Housing Welfare which involves interviewing, visiting, reporting, allocating property, dealing with general problems and enquiries which arise in the field of Housing always entails a heavy working day. The continuation programme for the conversion of Aged Persons' Dwellings to a gas fired Central Heating system greatly increased the daily work load as constant supervision was necessary if the work was to proceed smoothly and without undue stress to elderly tenants.

In the year January to December, 1972, 387 properties were converted from:-

- a) Solid fuel appliances
- b) Ducted Warm Air Systems
- c) Cannon Gas Fires with an Infra-Red Heater in the bathroom

: It was fortunate for all concerned that a single contractor was able to carry out the work. The rapport between the Health Department, tenants and contractor enabled the programme to run smoothly. A work schedule for the completion of nine properties a week was maintained throughout the year. The young workmen were exceedingly helpful in so many ways and not only in respect of the work for which they received a wage. Odd jobs and even shopping were voluntarily undertaken for the elderly people and everything was done with good humour and the desire to help.

The magnitude of the total work load was such that assistance was necessary to enable the Welfare Officer to carry out all her duties.

In June 1972, the Housing Committee approved the appointment of a temporary female Part Time Assistant. In November, 1972, this Assistant was promoted to temporary full time working.

Incorporated into the contract was the additional clause of restitution of decoration, this was a great help to many tenants who had neither family or friends to assist them with such an essential item.

In addition to the Central Heating programme, electrical rewiring of some Aged Persons' Dwellings was also necessary. Many problems had to be overcome particularly as this work immediately followed the disturbance caused by the installation of a heating system. The wiring in the dwellings however was giving cause for concern and there was no alternative but to contract the work out as quickly as possible.

It had been anticipated that a large number of tenants would need to leave their homes whilst either one or both major works were being undertaken, but this was not found to be the case only a small number of tenants moved from their homes to either relations or holiday beds in Part III Residential Homes.

Those who were accustomed to a weekly visit to the Health Department's Geriatric Day Centre at Sandfield House responded with satisfying alacrity to the suggestion of daily visits to the Centre until such time as their homes had been restored to normality.

Consultation with the East Midlands Gas Board on gas consumption for tenants who have now experienced a full year of living under the new heating arrangements shows that overall running costs per dwelling are approximately £1.20 per week, which must be considered favourable as compared to the present cost of solid fuel.

A report to the Housing Committee for permission to introduce a Peripatetic Wardens Service to council tenants of Aged Persons' Dwellings was approved in principle and a pilot scheme to cover five areas of the town was gradually brought into being. Permission was also given by the Housing Committee for the allocation of a suitable council house to the successful applicant if it was needed.

The Service is undoubtedly successful and cover is now given to 248 properties out of a total of 450. Expansion of the scheme is anticipated. It is regarded as a lifeline to the elderly tenant living alone. If the Service may not always save a life, at least no one could lie ill or dying for any length of time without attention.

Within the year two visits to other Authorities were undertaken.

1. Grimsby Borough Council
2. Cambridge Municipal Borough

The first visit was to a Grouped Dwelling Scheme where a home lift was incorporated into the building thereby eliminating the need for the transfer of tenants from first floor properties to ground floor as age and infirmity increases. The lifts are efficient and reasonable in capital cost, estimates have consequently been revised to incorporate this service into two existing Grouped Dwelling Schemes.

The Cambridge visit was most interesting as over a period of years radiant ceiling central heating by electrical sheet elements had been incorporated into various dwellings. The system was found to be efficient and inexpensive on the basis of maintenance and running costs. This was achieved by a thorough regard to insulation of:-

- a) Cavities between floors.
- b) Foam insulation of cavity walls pumped into the structure under pressure
- c) Double glazing

Throughout the year stress has been laid on the need for an increased building programme in the field of accommodation for the Aged. The Housing Committee have responded very satisfactorily and meetings with the Borough Architect and Consultant Architect have been quite a feature during the year.

Outline drawings of site positions and detailed drawings of Aged Persons' Dwellings have been produced and the interchange of information has brought about many revisions suitable to the needs of the elderly.

It is believed that the consultations will prove to have been of great value when the proposed dwellings are ready for occupation.

The hopes for the completion of five bungalows especially designed to house families where the head of the household or his wife are disabled persons have been delayed. Strikes by building operatives have partially been responsible coupled with difficulty in obtaining supplies. Work has however steadily gone on to further plans which eventually will relieve, a certain degree, the disabled persons dependence on their families.

Total Number of Aged Persons' Dwellings

	Bungalows		Flats		TOTAL
	1 Bedroom	2 Bedroom	1 Bedroom	2 Bedroom	
Aged Persons' Dwellings	112	178	432	18	740
Grouped Dwellings	36	-	62	-	98
TOTAL	148	178	494	18	838

Number of Properties Available for letting 1.1.72 - 31.12.72

New Property 24
By Transfer to other Aged Persons' Dwellings 18

By Termination of Tenancy

1. Deceased	30	
2. To Relatives	7	
3. To Part III Residential Accommodation	4	
4. To Hospital	3	
5. To Private Accommodation	1	
6. To Other Local Authority Housing	-	
7. Whereabouts unknown	1	
	46	46

New Property Allocations

To Applicants	13	
To Transfers	11	

Property Relets

To Applicants	32	
To Transfers	32	

Total Number of lettings

88 Total number of dwellings

88

AGED PERSONS' WAITING LIST

	at 31.12.71	New Registrations	Rehoused	Cancelled	at 31.12.72
Applicants	443	177	47	30	543
Transfer list	214	112	41	25	260
TOTAL	657	289	88	55	803

Number of Office Interviews

Welfare Officer	606	
Temporary Welfare Assistant from 13.6.72	65	
Clerk	298	
	969	969

Number of Home Visits

Welfare Officer	1520	
Seconded Services Part-time helper to 12th June 1972	124	
Temporary Welfare Assistant from 13.6.72	430	
	2074	2074

Total Number of Person's interviewed and visited

3043

PROPERTY AVAILABILITY - ALLOCATIONS BETWEEN APPLICANTS AND COUNCIL TENUREES

PROPERTY			APPLICANT'S						TRANSFERS								
MONTH	NEW PROPERTY	RELETS APDs/GDs	TOTAL		COURT ORDERS	CLEARANCE AREAS		TOTAL		FROM GENERAL PURPOSE ACCOM.	APD	PARK	CLEAR -	GENERAL	APD	PARK	TOTAL
			APDs	GDs		APDs	GDs	APDs	GDs			PURPOSE TO GD	TO GD	WARD ENVIRON	ANCE MENTAL	TO GD	TO GD
JAN	-	9	-	9	2	-	-	1	-	3	2	3	-	1	-	-	6
FEB	-	7	1	8	4	1	-	-	-	5	2	1	-	-	-	-	3
MARCH	-	3	3	6	2	1	-	-	-	3	1	-	-	-	-	2	3
APRIL	-	4	-	4	2	-	-	1	-	3	-	1	-	-	-	-	1
MAY	-	3	1	4	-	1	-	2	-	3	-	1	-	-	-	-	1
JUNE	12	9	-	21	6	-	-	4	-	10	9	2	-	-	-	-	11
JULY	12	5	-	17	9	-	-	-	-	9	7	1	-	-	-	-	8
AUGUST	-	2	-	2	-	-	-	-	-	1	1	-	-	-	-	-	2
SEPT.	-	3	-	3	3	-	-	-	-	3	-	-	-	-	-	-	-
OCT	-	10	-	10	2	-	-	2	-	4	-	3	1	1	-	1	6
NOV	-	3	-	3	-	-	-	1	-	1	1	-	-	-	-	-	2
DEC	-	1	-	1	1	-	-	-	-	1	-	-	-	-	-	-	-
	24	59	5	88	31	3	-	11	-	45	22	14	2	2	2	1	43

D SCHOOL HEALTH SECTION

Report of the School Medical Officer

4,249 children out of 15,445 attending Borough schools were medically examined in 1972 under the scheme at present in force whereby children are routinely examined three times during their school career, first as entrants, then in their last year at Junior School, and finally as leavers.

987 defects discovered amongst the children examined required either treatment or observation by the child's practitioner or a consultant. 478 of these defects were visual. In addition 617 defects requiring, for the present, nothing more than observation by the School Medical Officer were discovered amongst the children. When these figures are compared with those of the past eight years - except in 1969, to justify comparison, it will be seen that steady improvement in the condition of Scunthorpe children continues.

Year	No. of children given periodic exam.	No. of defects recorded	No. of defects recorded per 1,000 children examined
1965	3,922	2,189	558.1
1966	3,883	1,955	503.5
1967	4,137	1,962	474.3
1968	3,760	1,691	450.0
1969	4,709	2,224	472.3
1970	4,218	1,881	445.9
1971	3,827	1,649	430.9
1972	4,249	1,604	377.5

The routine vision and hearing testing of all children at five years old, in their first year at school, and again at nine years old continued, and the results clearly justify the large expenditure of audiometrist's time occupied in this undertaking. In 1972, 21,680 head inspections were carried out on pupils for the detection of verminous conditions, an increase of 11% over the 19,428 head examinations carried out in 1971. Fewer infested heads, 469 compared with 476, were found even with this greater number of inspections, so that it is clear that the increased efforts by the staff concerned is having the desired effect, and the increasing prevalence of lice infestation which has been occurring all over the country in the last few years is at last being contained in Scunthorpe.

SCUNTHORPE SCHOOLS 1972

I am indebted to Mr. Edmonds, Borough Education Officer, for the following information showing the number of pupils in each school in the Borough as at 31st December, 1972.

Number on Roll in Borough Schools

	<u>Total</u>
Ashby Infants' School	112
Ashby Junior School	252
Berkeley Infants' School	240
Berkeley Junior School	279
Brumby County Junior School	625
Brumby Comprehensive School	973
Bushfield Road Infants' School	144
Crosby Infants' School	267
Crosby Junior School	426
Enderby Road Infants' School	242
Foxhills Comprehensive School	858
Frodingham Infants' School	300
Grange Lane Infants' School	256
Grange Lane Junior School	385
Henderson Avenue Primary School	732
High Ridge Comprehensive School	1,090
John Leggott College	662
Lincoln Gardens Infants' School	213
Lincoln Gardens Junior School	348
Parkwood Infants' School	286
Parkwood Junior School	392
Priory Lane Infants' School	270
Priory Lane Junior School	437
Riddings Infants' School	227
Riddings Junior School	417
Riddings Comprehensive School	1,063
Rochdale Road Junior School	337
Scunthorpe C. of E. Primary School	294
St. Augustine Webster School	319
St. Bede's R. C. Comprehensive School	552
St. Bernadette's R. C. Primary School	414
St. Hugh's Special School	166
St. Luke's Special School	100
Sunway Infants' School	166
Thomas Sumpter Comprehensive School	1,006
Westcliffe Infants' School	247
Westcliffe Junior School	348
<hr/>	
TOTAL	15,445
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INFECTIOUS DISEASES NOTIFIED BY SCHOOL (TABLE A)

TABLE A CONT.

	Total	Observation	Rubella	Meningitis	Infective Hepatitis	Impetigo	Food Poisoning	Scabies	
Ashby Infants	56	1							
Berkeley Junior	47	3							
Berkeley Infants	31								
Brumby Junior	25								
Brumby Comprehensive	12								
Bushfield Road Infants	34								
Crosby Infants	25								
Crosby Junior	12								
Enderby Road Infants	7								
Frederick Gough Comprehensive	26								
Frodingham Infants	16								
Foxhills Comprehensive	68								
Grange Lane Infants	15								
Grange Lane Junior	86								
Henderson Avenue Primary	12								
High Ridge Comprehensive	2								
John Leggott College	17								
Lincoln Gardens Infants	1								
Lincoln Gardens Junior	23								
Parkwood Infants	6								
Parkwood Junior	43								
Priory Lane Infants	14								
Priory Lane Junior	23								
Riddings Infants	8								
Riddings Junior	9								
Riddings Comprehensive	45								
Rochdale Road Junior	20								
Scunthorpe C.E. Primary	6								
St. Augustine Webster	3								
St. Bede's	2								
St. Bernadette's	3								
St. Hugh's	9								
St. Luke's	3								
Sunway Infants	6								
Thomas Sumpter Comprehensive	3								
Westcliffe Infants	6								
Westcliffe Junior	3								
Totals	817	103	6	-	162	10	1	21	

Defect Code No.	Defect or Disease	Periodic Inspection						Total
		Entrants (1st Age Group)		Leavers (3rd Age Group)		Others		
		Requiring treatment	Requiring observat- ion	Requiring treatment	Requiring observat- ion	Requiring treatment	Requiring observat- ion	
4	Skin	22	3	14	4	18	54	9
5	Eyes - a. vision b. squint c. other	32	12	194	50	120	371	182
6	Ears - a. hearing b. otitis media c. other	54	2	17	1	32	103	4
7	Nose and Throat	2	-	2	-	1	-	-
8	Speech	13	28	11	3	1	5	5
9	Lymphatic Glands	17	6	16	3	2	19	6
10	Heart	1	-	31	1	1	19	35
11	Lungs	10	17	5	2	1	1	6
12	Developmental - a. hernia b. other	19	17	5	10	2	9	17
13	Orthopaedic - a. posture b. feet c. other	5	5	16	3	1	12	20
14	Nervous System - a. epilepsy b. other	14	11	1	-	1	1	1
15	Psychological - a. development b. stability	7	3	25	4	3	10	21
16	Abdomen	7	-	6	1	1	2	17
17	Other	3	-	3	-	1	-	1

SCHOOL MEDICAL INSPECTIONS, 1972

A

Defect Code No.	Defect or Disease	Requiring Treatment	Requiring Treatment per 1,000 examined	Requiring Observat- ion
4	Skin	54	12.71	9
5	Eyes - a. vision b. squint c. other	371 103 5	87.31 24.24 1.18	182 4 -
6	Ears - a. hearing b. otitis media c. other	52 12 3	12.24 2.82 0.71	66 3 1
7	Nose and Throat	21	4.94	21
8	Speech	19	4.47	35
9	Lymphatic Glands	1	0.24	6
10	Heart	17	4.00	38
11	Lungs	53	12.47	9
12	Developmental - a. hernia b. other	6 37	1.41 8.71	6 56
13	Orthopaedic - a. posture b. feet c. other	1 21 20	0.24 4.94 4.71	2 38 9
14	Nervous System a. epilepsy b. other	19 7	4.47 1.65	1 -
15	Psychological - a. development b. stability	100 27	23.53 6.35	62 25
16	Abdomen	6	1.41	-
17	Other	32	7.53	44
Total		987	232.29	617

SCHOOL MEDICAL INSPECTIONS, 1972

B

Defect Code No.	Defect or Disease	Requiring Observation per 1,000 examined	Treatment and Observation	Tre and b vat n ex i
4	Skin	2.12	63	14.3
5	Eyes - a. vision b. squint c. other	42.83 0.94 -	553 107 5	130.5 25.3 1.3
6	Ears - a. hearing b. otitis media c. other	15.53 0.71 0.24	118 15 4	27.7 3.3 0.1
7	Nose and Throat	4.94	42	9.3
8	Speech	8.24	54	12.1
9	Lymphatic Glands	1.41	7	1.1
10	Heart	8.94	55	12.1
11	Lungs	2.12	62	14.4
12	Developmental - a. hernia b. other	1.41 13.18	12 93	2.4 21.1
13	Orthopaedic - a. posture b. feet c. other	0.47 8.94 2.12	3 59 29	0.1 13.6 6.1
14	Nervous System - a. epilepsy b. other	0.24 -	20 7	4.1 1.1
15	Psychological - a. development b. stability	14.59 5.88	162 52	38.1 12.1
16	Abdomen	-	6	1.1
17	Other	10.36	76	17.1
Total		145.21	1,604	377.1

SCHOOL MEDICAL INSPECTIONS, 1972

Defect Code No.	Defect or Disease	Special Inspections	
		Requiring treatment	Requiring observation
4	Skin	1	-
5	Eyes - a. vision b. squint c. other	5 3 -	1 - -
6	Ears - a. hearing b. otitis media c. other	13 - -	2 - -
7	Nose and Throat	-	-
8	Speech	5	1
9	Lymphatic Glands	-	-
10	Heart	1	-
11	Lungs	-	-
12	Developmental - a. hernia b. other	- -	- -
13	Orthopaedic - a. posture b. feet c. other	- - 1	- - -
14	Nervous System - a. epilepsy b. other	2 -	- -
15	Psychological - a. development b. stability	43 10	5 -
16	Abdomen	-	-
17	Other	6	-

Age Groups Inspected (by years of birth)	Number of Children found to require treatment (including cases under treatment but excluding dental diseases and infestation with vermin).			Physical Condition	
	For defective vision (excluding squint)	For any other condition recorded	Total individual children requir- ing treatment	S (Satis- factory)	U (Unsatis- factory)
1968 and later	62	-	10	62	nil
1967	615	3	65	615	nil
1966	751	21	101	751	nil
1965	76	5	14	76	nil
1964	21	2	14	21	nil
1963	17	1	5	17	nil
1962	128	3	4	128	nil
1961	903	23	3	903	nil
1960	412	15	34	412	nil
1959	34	92	207	34	nil
1958	31	135	77	31	nil
1957 and earlier	599	52	207	599	nil
	634	124	68	634	nil
Total	4,249	371	523	829	4,249
					nil

ROUTINE AUDIOMETRIC AND VISION TESTING

Vision Testing of 5 year olds in School
Routines

Number Tested	No Action	Referred to eye Clinic	Re-test	Wearing Glasses Satisfactory	Referred to eye Clinic
1690	1559	117	9	5	-

Specials

Number Tested	No Action	Referred to eye Clinic	Re-test	Wearing Glasses Satisfactory	Referred to eye Clinic
163	124	19	16	4	-

Vision Testing of 9 year olds in School
Routines

Number Tested	No Action	Referred to eye Clinic	Re-test	Wearing Glasses Satisfactory	Referred to eye Clinic
1512	1375	109	26	2	-

HEARING TESTS

Hearing Tests of 5 year olds, 9 year olds and Specials

	Number Tested	Referred to school Medical Officer	Referred for Re-test	Number without Hearing Loss	Cases Confirmed Deafness No.	%
Routine Examination of 5 yr. olds	1697	11	168	1518	4	0.24
Routine Examination of 9 yr. olds	1578	21	164	1393	6	0.38
Special Examinations	411	41	162	208	19	4.62
Total	3686	73	494	3119	29	0.79

Verminous Conditions

During the year 21,680 examinations were carried out and 469 pupils, or 2.16% of the pupils inspected, were found to be infested to some degree.

Minor Ailments

During the year 11 children attended the minor ailments clinic at Parkinson Avenue where minor dressings and treatments are carried out.

School Clinic

The following table shows the number of children who attended the three weekly clinics:-

SCHOOL CLINIC

				Total Attendances	First Attendance					
		Skin	Eyes	Ears		Devel-	Ortho-	Ner-	Psych-	Misc.
						opmen-	paedic	vous	ologi-	
Scunthorpe	438	102	-	-	Ringworm					
Ashby	468	111	2	2	Scabies					
Riddings	217	47	3	2	Impetigo					
			1	9	Other					
			3	2	Defective Vision					
			-	1	Squint					
			-	9	Other					
			2	-	Defective Hearing					
			1	2	Otitis Media					
			4	2	Other					
			2	1	Nose and Throat					
			-	1	Speech					
			-	1	Lymphatic Glands					
			-	1	Heart					
			-	1	Lungs					
			-	1	Hernia					
			-	1	Other					
			-	1	Posture					
			-	7	Feet					
			2	5	Other					
			-	1	Epilepsy					
			-	1	Other					
			1	1	Development					
			1	5	Stability					
			3	4	Other					
			-	1	Minor					
			-	1	Otherwise dealt with					
			-	1	No appreciable defect					
			1	49	Special Medical examinations					
			1	45	Innoculations					
			1	11	Post audiometric examinations					
Total	1,123	260	-	6	5	23	8	1	13	2
			-	-	-	-	-	-	-	104
			-	-	-	-	-	-	-	133
			-	-	-	-	-	-	-	66

Treatment of Defects

The procedure for the disposal is unaltered.

Disposal of New Cases found at Routine Inspection 1972.

Number of cases referred to G.P.'s	51
Of these the following action was taken:-	
Number of cases referred to specialists	30
Treated by G.P.'s	4
No treatment necessary	3
No reply from G.P.'s or number of cases pending	14
Number of cases referred to specialist by School Medical Officer	35
Number of cases referred to eye clinic	120
Number of cases attended eye clinic	85
Number of cases awaiting appointment at eye clinic	18
Persistent refusals and discharged from eye clinic	10
Number of cases lost trace of	Nil
Number of cases attending private optician	7

Eye Clinic

Out of a total of 851 children who attended the eye clinics during the year 373 children were prescribed glasses.

Ear, Nose and Throat Defects

42 known children had operations for tonsils and adenoids.

Handicapped Pupils

The following table illustrates the position concerning handicapped pupils in the Borough as on
31st December, 1972.

Category	New Cases Ascer-tained	Cases Removed from Register	Remaining on Register at end of year	Incidence per 1,000 school population	No. at Special Schools	No. at Ordinary Schools	Not at School	Number Awaiting admission to special schools
Blind	-	2	1	0.06	1	-	-	-
Partially Sighted	-	-	2	0.13	-	2	-	-
Deaf	1	-	4	0.26	3	-	1	1
Partially Hearing	4	6	24	1.55	1	21	2	-
Delicate	3	-	28	1.81	2	26	-	2
Physically Handicapped	6	2	45	2.91	12	32	1	5
Educationally Sub-normal	42	56	344	22.27	219	119	6	68
Maladjusted	4	3	17	1.10	9	7	1	7
Epileptic	8	5	30	1.94	2	28	-	-
With Speech Defects	39	50	80	5.18	-	80	-	-
Total	107	124	575	37.23	249	315	11	83

DENTAL REPORT 1972

Staff

Area Dental Officers

P. Betts L.D.S.

Mrs. M. Clayton B.D.S. L.D.S.

J. McCutcheon L.D.S. (retired 31.12.72)

Dental Officer

Miss K. Lawlor B.D.S. (appointed 9.5.72)

Dental Auxiliary

Miss L. Robinson

Dental Assistants

Mrs. S. Allison

Mrs. S. Barry (resigned 25.8.72)

Mrs. P. Campbell (6.7.72 to 31.12.72)

Mrs. N. Rysdale

Mrs. E. D. Spencer

Miss H. Walsh

Mr. McCutcheon retired in December 1972 and so far we have been unable to find a replacement. This means that Ashby Dental Clinic will have to be closed temporarily, Ashby patients being treated at Parkinson Avenue and Riddings Dental Clinic. This will increase the work load on these two Clinics and may mean delay in routine school inspections.

We were happy to welcome Miss Lawlor's return to the School Dental Service on a part-time basis. Miss Lawlor joined the staff in May 1972, and is working at Riddings Clinic with Mr. Betts. Mrs. N. Rysdale, dental assistant, is now working part-time, as from August 1972, as Miss Lawlor's assistant.

As there will possibly be only one more Dental report before Local Government reorganisation in 1974, perhaps this is now the time to make some comment on the effect of fluoridation of water supplies on the teeth of Scunthorpe children.

Although fluoride was added to the Town's water supply in 1968, due to shutdowns/or breakdowns in the plant, in 1968 and 1969, the first full year of consistent fluoridation of water supplies was 1970.

It normally takes 3 years before the effects of fluoridation begin to show in children's teeth. I am referring now to the under six age group where the effects are most noticeable. 1972 was the year in which I hoped to see improvement compared with our base line and our control Town of Corby, Northamptonshire.

We began our seven year Epidemiological Survey in 1969 using Corby as a control Town. Children in three age groups:- 5 years, 8 years and 12 years are examined annually in Scunthorpe and Corby. Data from the latest computer print-outs of the Survey are shown in Table 1 and on the graph.

Table 1 is an Epidemiological Summary Table showing:-

- (1) The average D.M.F. figure (decayed, missing, filled) which is an indication of the average amount of dental decay per child.
- (2) Average number of decayed teeth per child.
- (3) Average number of missing teeth (extracted) per child.
- (4) Average number filled per child.
- (5) % of children caries free.

Graphs showing - % of children caries free

- D.M.F. average in 1969, 1970, 1971, 1972.

From the graphs you can see a steady increase in the number of children caries free in Scunthorpe compared with Corby, and a steady decline in the average D.M.F. figure of children in Scunthorpe compared with Corby.

It is born out in the Summary Table in spite of the fact that the concentration of Fluoride in the water supply was on the lowside in 1972, rarely reaching the desired level of 1 part per million.

All this would seem to point to the fact that fluoridation of the Town's water supplies appear to be reducing dental decay in the 5 year old age group. I hope the 1973 survey which I have recently carried out with my colleague Mr. R. Humphries from Corby, will confirm the fact.

Dental Health

Miss Robinson, Dental Auxiliary, is concentrating more on Dental Health both in the Surgery and at Schools. The programme of lectures on Dental Health to Primary Schools continued during 1972. Miss Robinson also visited Playgroups giving talks and showing films on Dental Health. It must be appreciated this is at a very simple level for children in the playgroups so that they might understand something of Dental Health.

Topical Fluoride Treatments are being offered to older children at the Clinic, who will not have benefited from fluoride in the water supplies to the same extent as younger children.

Area	Age	Sex	Number	Dentition	Average DMF/def	Average Number of teeth			Children Caries Free	Children DMF of 10 or more	% Examined (year)
						D	M	F			
Scunthorpe	5	M	105	Dec	4.01	3.37	0.59	0.05	25.7	8.6	1969
	5	F	91	Dec	4.60	4.00	0.54	0.07	15.4	7.7	1969
Corby	5	M	104	Dec	4.29	2.74	1.15	0.39	20.2	8.6	1969
	5	F	101	Dec	4.27	3.11	1.00	0.16	22.8	9.9	1969
Scunthorpe	5	M	95	Dec	4.25	3.15	1.00	0.11	24.21	10.53	1970
	5	F	99	Dec	3.47	2.54	0.68	0.26	34.34	8.08	1970
Corby	5	M	103	Dec	4.44	2.94	1.18	0.13	30.10	11.65	1970
	5	F	111	Dec	4.39	2.65	1.15	0.59	24.32	11.71	1970
Scunthorpe	5	M	91	Dec	4.07	3.19	0.75	0.13	25.27	7.69	1971
	5	F	93	Dec	3.14	2.59	0.48	0.06	27.96	4.30	1971
Corby	5	M	82	Dec	3.59	2.54	0.76	0.29	31.71	9.76	1971
	5	F	81	Dec	3.53	2.11	1.06	0.36	23.46	7.41	1971
Scunthorpe	5	M	92	Dec	3.33	2.11	0.80	0.29	29.35	8.70	1972
	5	F	94	Dec	3.15	2.30	0.72	0.13	39.36	7.45	1972
Corby	5	M	95	Dec	4.62	3.04	1.08	0.49	15.79	9.45	1972
	5	F	91	Dec	4.38	2.33	1.25	0.80	27.47	9.89	1972

EFFECT OF FLUORIDATION ON THE TEETH OF FIVE YEARS OLD CHILDREN IN SCUNTHORPE COMPARED WITH THE CONTROL TOWN OF CORBY

SCUNTHORPE —————

— · · · · — CORBY

Scunthorpe

are "Caries Free" compared with Corby

In graph A the D.M.F. figure (decayed, missing, filled) is becoming lower compared with Corby

Graph B shows an increasing number of children in Scunthorpe are "Caries Free" compared with Corby

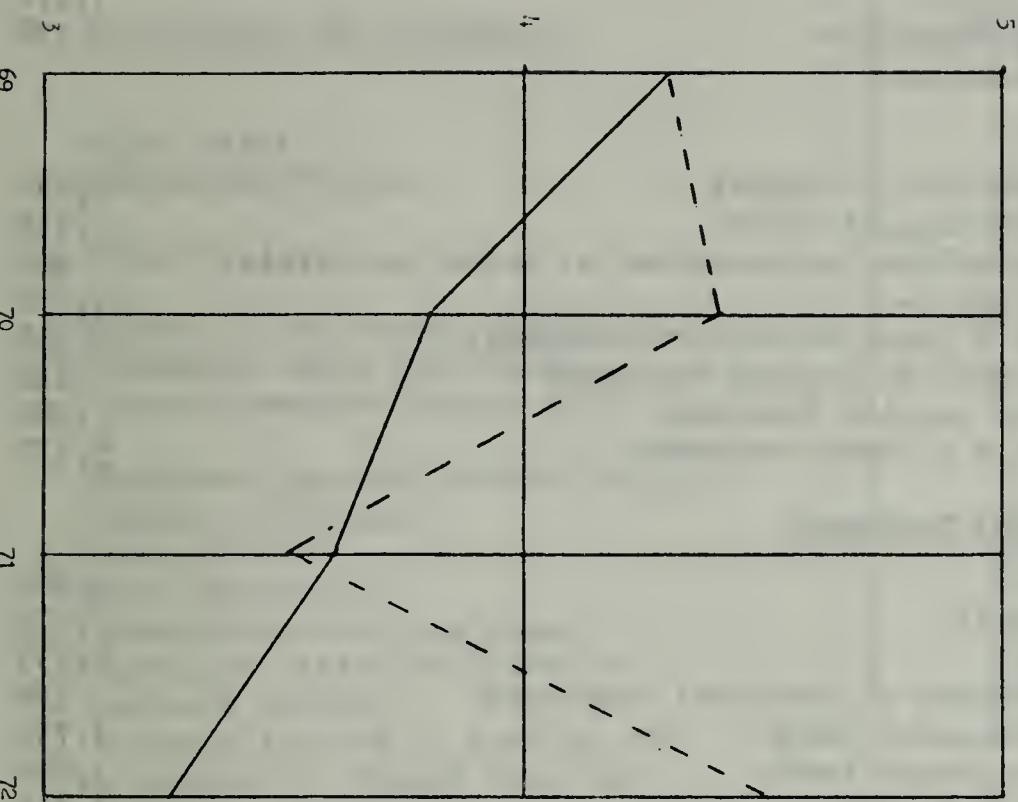
D.M.F.

A

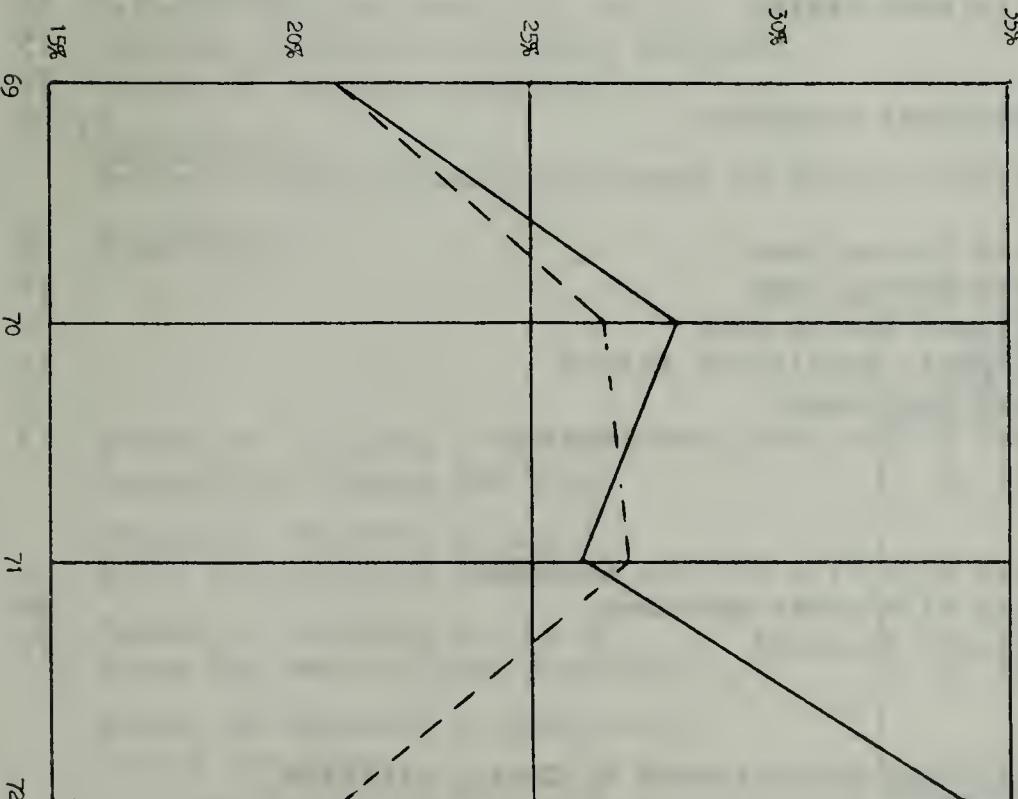
PERCENTAGE
CARIES FREE

35%

30%



YEARS



YEARS

Table Showing Dental Inspection and Treatment

Sessions Devoted to:-

Inspection	69
Treatment	1,476
Dental Health Education	158

Inspections

A. First inspection at school	10,012
B. First inspection at clinic	2,258
C. Number of children re-inspected at school or clinic	402
Total inspected	12,672
Number of A & B found to require treatment	6,858
Number of C found to require treatment	222
Total found to require treatment	7,080
Number of A & B offered treatment	5,377

Attendances and Treatment

First visit	3,984
Subsequent visits	3,575
Total visits	7,559
Additional courses of treatment commenced	396
Fillings - permanent teeth	4,752
Fillings - deciduous teeth	1,010
Permanent teeth filled	4,410
Deciduous teeth filled	972
Permanent teeth extracted	1,135
Deciduous teeth extracted	3,128
General anaesthetics	1,863
Emergencies	382
Number of pupils x-rayed	222
Prophylaxis	828
Teeth otherwise conserved	84
Number of teeth root filled	59
Inlays	15
Crowns	76
Courses of treatment completed	4,184

Orthodontics

Cases commenced during year	6
Cases completed during year	11
Cases discontinued during year	2
Number of removable appliances fitted	11
Number of fixed appliances	-
Pupils referred to hospital consultant	3

Prosthetics

Pupils supplied with F.U. or F.L. dentures	-
Pupils supplied with other dentures	29
Number of dentures supplied	35

Anaesthetics

General anaesthetics administered by Dental Officers	-
--	---

Non-School Dental Work for Year 1972

M. & C.W.

A. Attendances and Treatment

First Visit	211	90
Subsequent Visits	73	76
Total Visits	284	166
Number of additional courses of treatment other than first course commenced during year	7	6
Treatment provided during year:-		
Number of Fillings	97	90
Teeth Filled	92	82
Teeth Extracted	188	88
General Anaesthetics given	97	23
Emergency Visits by Patients	24	3
Patients x-rayed	2	3
Patients treated by Scaling and/or removal of Stains from the teeth (prophylaxis)	5	44
Teeth otherwise Conserved	1	-
Teeth Root Filled	-	-
Inlays	-	-
Crowns	-	1
Number of Courses of Treatment completed during the year	125	72

	Children 0-4 (incl.)	Expectant and Nursing Mothers
First Visit	211	90
Subsequent Visits	73	76
Total Visits	284	166
Number of additional courses of treatment other than first course commenced during year	7	6
Treatment provided during year:-		
Number of Fillings	97	90
Teeth Filled	92	82
Teeth Extracted	188	88
General Anaesthetics given	97	23
Emergency Visits by Patients	24	3
Patients x-rayed	2	3
Patients treated by Scaling and/or removal of Stains from the teeth (prophylaxis)	5	44
Teeth otherwise Conserved	1	-
Teeth Root Filled	-	-
Inlays	-	-
Crowns	-	1
Number of Courses of Treatment completed during the year	125	72

B. Prosthetics

Patients supplied with F.U. or F.L. (First time)	4
Patients supplied with other dentures	2
Number of dentures supplied	6

C. Anaesthetics

General anaesthetics administered by Dental Officers	Nil
--	-----

D. Inspections

	Children 0-4 (incl.)	Expectant and Nursing Mothers
Number of Patients given first inspections during the year	A 238	D 86
Number of Patients in A & D above who required treatment	B 115	E 70
Number of Patients in B & E above who were offered treatment	C 105	F 69
Number of Patients re-inspected during the year	J 3	K 4

E. Number of Dental Officer Sessions Devoted to Maternity and Child Welfare Patients

For Treatment	132
For Health Education	Nil

CHILD GUIDANCE AND SCHOOL PSYCHOLOGICAL SERVICE

A total of 180 children were seen by Dr. Wakeling during the year. Of this total 89 were new cases and 91 children attended for review interviews.

SPEECH THERAPY

Number of cases Treated	130
Number of cases Discharged	50
Number of cases Receiving Active Treatment	nil
Total Number of cases still requiring treatment	80
Total Number of Sessions held	360
Total Number of Attendances	1,021

E REPORTS TO THE COMMITTEE

R E P O R T S

During the year several reports on various subjects were made to the Health Committee and those not dealt with elsewhere are gathered together in this section namely:-

Report of the Medical Officer of Health
on Roller Towel Fixtures

- - - - -

Report of the Medical Officer of Health on the Brodrick Report

- - - - -

Report of the Medical Officer of Health on
Continuity of Programming for Gas Central Heating
in Aged Persons' Bungalows

- - - - -

Report of the Medical Officer of Health on
a Further Programme of Aged Persons' Accommodation

- - - - -

Report of the Medical Officer of Health on
Warden Services to Council Owned Aged Persons' Dwellings

- - - - -

Report of the Medical Officer of Health on Peripatetic
Warden's Services to the Tenants of Council Owned Aged
Persons' Dwellings

- - - - -

Report of the Medical Officer of Health on
Peripatetic Warden's Services to the Tenants
of Council Owned Aged Persons' Dwellings

- - - - -

Report of the Medical Officer of Health on
The Aged Persons' Waiting Lists and Requirements for Additional
Properties

- - - - -

Report of the Medical Officer of Health on the Annual Reports of the
County Medical Officer of Health and Principal School Medical Officer
of Lindsey County Council for the Year 1971

- - - - -

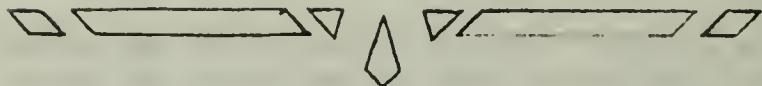
Report of the Medical Officer of Health on Scunthorpe South
Health Centre

- - - - -

A few further reports written in 1973 are included because
of their importance and the near certainty that no full report

for 1973 will ever be presented.

It is of interest to note that for the last two years or so the reports on Housing Matters have been becoming as numerous as those on other Health Matters. This is of course not surprising considering the tremendous impact on the Health of the Community Housing exerts but it is also a direct result of the transfer of responsibility for Aged Persons' Dwellings to the Health Department which necessitated close and careful scrutiny of the arrangement and this in turn resulted in the series of reports. Another suggested improvement which was not embodied in any reports but was dealt with by memoranda to the other departmental officers concerned indicates that it is perfectly feasible to put the heating charges for Aged Persons' Dwellings on a permanent addition to rentals basis. This suggestion appears to have become lost in the usual welter of interdepartmental paper work and may require to be revived in the form of a report to committee if any change is to be expected.



Report of the Medical Officer of Health
on Roller Towel Fixtures

My Health Visitors have brought to my notice that a number of accidents, some of them fatal, have occurred where roller towels and automatic roller towel cabinets are available for the use of children.

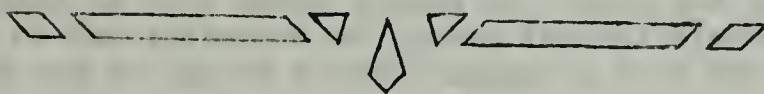
In the accidents which have occurred, the children put their heads or bodies inside the loop of the towel and use it as a swing, or they twist themselves and the towel round and then let it swing them round as it uncoils.

I am advised that the simple preventive measure advised by the roller towel firms is to fit a bar to the wall below the cabinet and feed the towel loop through the bar.

There are a considerable number of these cabinets in use in the town and in the Borough Departments.

I advise that this information be brought to the notice of all concerned.

3rd January, 1972



REPORT OF THE MEDICAL OFFICER OF HEALTH ON THE BRODRICK REPORT

The full title of this report is "Report of the Committee on Death Certification and Coroners", and the terms of reference were to review -

- a) the law and practice relating to the issue of medical certificate of the cause of death and for the disposal of dead bodies, and
- b) the law and practice relating to coroners and coroners' courts, the reporting of deaths to the coroner and related matters,

and to recommend what changes are desirable.

The report itself is large. It runs to some 418 pages and contains a long list of recommendations. The heading of the recommendations reads as follows - "Summary of recommendations - the following is a definite summary of our principle recommendations but reference to the text must be made for full explanation of our proposals", and there are 114 itemised recommendations.

The report itself outlines an integrated plan for the ascertainment and notification of a) the fact of death and

b) the cause of death in normal and abnormal circumstances, and it appears that an act of Parliament would be required to implement this scheme. Basically in normal circumstances only fully qualified doctors who have seen the patient before and after death should be permitted to sign death certificates in normal cases if they can confidently state the cause of death. A death certificate so signed and issued is accepted by the Registrar and the death is registered. When the death is so registered there is no further restriction on the method of disposal of the body.

In all other cases the death must be reported to the coroner who should have powers to order post mortem examinations. The post mortem establishes the cause of death which is then registered and further action is the responsibility of the coroner. The report recommends that post mortems should only be done in hospital pathology departments and hospital pathologists should be used and that the provision of a pathology service for coroners should be the responsibility of the National Health Service and be part of it. Local authority mortuaries should be done away with and hospital mortuaries should be enlarged and be the only ones used. The coroner should be a qualified lawyer and the appointment should be full-time. The coroners areas should be the new counties and the metropolitan authorities. Coroners should be appointed by the Lord Chancellor.

The whole system of certificates and medical referees for crematoriums should be scrapped and the ordinary certificate should suffice for any form of disposal of the dead.

The rest of the report is mainly given over to fairly detailed instructions as to how a coroner's inquest should be conducted and to fairly detailed instructions on the work a coroner should do and on how he should do it.

COMMENTS: Hospital mortuaries and pathology departments are not at present built to cope with this type of work and post mortem examinations on persons dying in hospitals are entirely different from post mortems on persons found dead after weeks or months of exposure and these corpses and post mortems would not be acceptable in hospital post mortem departments, and would not in fact be admitted without an act of Parliament to enforce acceptance.

There is at the moment no power to enforce admission of a sick living person to any hospital and it is questionable whether the Minister will accept legislation to force him to accept dead ones. Some bodies found dead might well have died from infectious diseases and such a body should not be taken to hospitals or for that matter into any place where the risk of spread of infection would be exaggerated and members of the public placed at unnecessary risk.

At present local authorities are responsible for dealing with dead bodies found anywhere in the area and are required to collect, accommodate, bury them at public expense if necessary. This responsibility is not defined in the report. Scunthorpe about 15 years ago provided a new mortuary but the hospital raised difficulties over accepting outside bodies into its mortem accommodation.

At present the larger local authorities have good mortuaries and after reorganisation of the local authorities in 1974 all authorities will be large that they are likely to have good mortuary facilities or to be able provide them.

ICE: I advise that the new scheme cannot be expected to work unless it is implemented in its entirety. I advise that no action should be taken at all until after the new larger local authorities have been formed and are in fact working and that the scheme should then be reconsidered.

I advise that hospitals should not be forced to accept the accommodation of any dead body as this may be a danger to the public.

I advise that the present cremation certification system is a highly efficient barrier against any hidden criminal deaths and should only be replaced after the new system is working in all other respects.

16th March, 1972.



Report of the Medical Officer of Health
on Continuity of Programming for Gas Central Heating
in Aged Persons' Bungalows

The existing programme for conversion from a solid fuel heating appliance to the Vulcan Verona gas fired central heating system is proceeding smoothly. The work commenced on the 29th November, 1971, and 31 bungalows have been completed to date. The contractor has maintained his schedule of 4 completed dwellings per week. It can therefore be anticipated that the remaining 28 properties will be completed by the 31st March, 1972, the contract being for 59 dwellings.

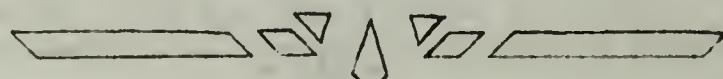
To maintain continuity of programming for the next 120 dwellings I recommend that tenders should be invited immediately.

In view of the co-operation the tenants have received from the present contractor and the expeditious way in which he has carried out his contract the Housing Committee may consider it advisable to negotiate a contract with this firm if this is possible.

The areas to be converted are as follows:-

Address	Property Numbers	1 Bedroom	2 Bedrooms	Total
Angerstein Road	50, 60	2	-	2
Barnetby Road	30 - 52	12		12
Beesby Road	2 - 32		16	16
Kingerby Road	1 - 35	18		18
" "	37 - 59		12	12
Ranby Road	1, 11	2		2
Willoughby Road	6, 8		2	2
" "	29 - 59		16	16
" "	116 - 120	3		3
" "	61, 71	2		2
The Cottages	1 - 16		16	16
Grouped Dwelling, Keelby Road	17 - 35	10		10
" "	39 - 53	8		8
Warden's property, Keelby Road	37			1
		57	62	120

February, 1972.



Report of the Medical Officer of Health
on a Further Programme of Aged Persons' Accommodation

This report is in the nature of a follow-up of my previous report on this subject which was presented to the Housing Committee in September, 1971.

The suggested programme covers a total of 275 one-roomed flats which might be commenced or completed in the next two years or so. The new decisions on County Humberside and the likely enlargement of the Borough area to include a large rural district will have a very marked influence on the future form of A.P. accommodation requirements. It is to be expected that many more aged persons in the surrounding villages will apply to come into the Borough as we now know it.

My first report suggested that about 500 units of accommodation should be supplied and this report carries these conclusions into more detail for the next two or three years. In this report the sites named have been discussed with the other officers concerned and it is accepted that most of these are likely to become available. It is suggested that a Grouped Dwelling Scheme for Westcliff, with pedestrian only access to the shopping centre will soon be necessary.

If the redevelopment of Earl Street and Beauchamp Street permits, a Grouped Dwelling Scheme in this area is also likely to be of great service.

February, 1972.

Aged Persons' Dwellings Proposed Programme 1972 - 1974/75
1 Bedrooomed Flats

Site	Number of Dwellings	Site Availability	Completion	Remarks
Washby High Street	24	Under construction	1972	Number of dwellings may be increased to 32
Westcliff (central)	20 or 20+	autumn 1972	?73	This site would lend itself for a Grouped Dwelling Scheme and it may be possible to have a link system for communication with existing dwellings numbering 104 i.e. Dryden Road, Durham & York House
Westcliff (Parkwood)	nil			Site considered unsuitable, too far from amenities
Colium Avenue	8	Spring 1972	72/73	
Willoughby Road	4	Spring 1972	72/73	
Manley Street	40	?Nov/Dec 72	?	a greater number of ground floor to first floor properties required
Earl Street (phase I)	25	?Nov/Dec 72	?	Group dwelling scheme
Chatterton Cres.	20	March 73	?	Subject to Ministry approval. Total number of A.P.D.'s site would be 58. Cost yardstick may also necessitate mixed development
Queen Street (Prod.)	16	April 73	?	
Levendale Street	40	July 73	?	Requirements as for Manley Street
Earl Street (phase II)	15	April 74	?	
Collum Lane/School Road	15	?	?	Negotiations re-opened. Price of land
Kesterby Road	8	?	?	Under negotiation. Purchase of rear gardens, Burringham Road

Report of the Medical Officer of Health
on
Warden Services to Council Owned Aged Persons' Dwellings

It may be recalled that in February 1968 I submitted to the Mayor full report on Emergency Communications Services for the Elderly and following a report by the Chairman of Health Committee at that time the Finance and General Purposes Committee took responsibility for the matter (reference - minute 25 of meeting held 31st March, 1969, and minute 25 of meeting held 14th July, 1969). The matter was left with the Chairman and Vice-Chairman of the Finance and General Purposes Committee and the Chairman and Vice-Chairman of the Health Committee.

Recently the matter has been resurrected (reference - Finance and General Purposes Committee minute 21 of meeting held 17th January, 1972) bearing in mind the need for such a service together with the need for Warden services generally to cover the elderly living alone I have prepared a scheme for consideration by the Council.

The provision of telephone facilities at certain points would be helpful to those persons able to get to the facilities. However, the real need is a service providing for calls on all known aged persons living alone, at least once per day.

From the total of 814 Aged Persons' Dwellings it is possible for the reasons given below in Table I to eliminate 146 properties leaving a total of 668 dwellings to be covered by the proposed service.

Table I

Number of properties capable of being supervised by the Wardens of existing Grouped Dwellings

<u>Grouped Dwelling</u>	<u>Number of Properties</u>	<u>Additional Properties</u>	<u>Number</u>	<u>Total</u>
Chatterton Crescent	22	Chatterton Cres.	16	
Healey Road	18	Healey Road	4	
Peterborough Road	40	-	-	
Tetley Road	18	-	-	
	98		20	118

Number of properties to be linked to Part III Residential Homes

He Hollies	Pear Tree Cottages	6	
Marley House	Tetley Road	6	
		12	12

Number of properties with resident Caretakers

Church Court (Market Hill)	12	12
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Future Planning of Grouped Dwelling Schemes and existing properties capable of supervision by the Warden

Earl Street	40	Queen Street	4	4
	40		4	146

A Warden Scheme to cover 668 dwellings should be simple and efficient and the main factors for consideration are:-

- a. Eliminating the risk of a tenant lying ill, dying or dead for any great length of time without attention. It is therefore necessary to provide daily visits to ensure the wellbeing of individuals.
- b. Contact with statutory bodies, doctors etc.
- c. Obtaining prescriptions, pensions etc.
- d. Contact, if necessary, with relatives.
- e. In cases of need cover will be given by arrangement during weekend periods by the District Nurses.
- f. Telephone connection for each Warden.

It is my considered opinion that because the dwellings are spread throughout the length and breadth of the Borough that invariably the Warden must go to the people and only on a few sites will it be possible for the tenant to go to the Warden. I propose to divide the town into areas, the object being where possible to give each Warden a case-load of approximately 25 dwellings.

Careful thought must be given precisely where in any one area the Warden must live and it will therefore be necessary to seek the future co-operation of the Housing Committee in making available property as and when a suitable vacancy arises.

It will also be of paramount importance when appointing Wardens that persons of suitable calibre are selected.

Obviously both of these factors, i.e. properties and selection of Wardens, will mean delay before a full service can be put into operation.

I therefore recommend that a pilot scheme should be commenced in the Crosby area giving cover to Giblin Cottages. To do this I shall require the adjacent property, No. 16 Barnes Crescent, which I understand will shortly be vacated by the present occupant. In addition linked services with two Grouped Dwelling schemes, Chatterton Crescent and Pryme Road could also be commenced.

When the scheme is fully implemented I estimate that there will be a need, at present, for 27 part-time Wardens, in addition to the four Wardens already employed in the Grouped Dwelling schemes.

<u>Area Breakdown</u>	<u>Properties</u>	<u>Number of Wardens</u>
Crosby	80	3
New Brumby	54	2
Grange Lane South (East)	56	2
Grange Lane South (South)	40)	4
Ashby	54)	
Ashby High Street	50 + 24 under construction	3
Higher Riddings	40)	
Middle Riddings	60)	5
Lower Riddings	38)	
Lincoln Gardens	94	4
Westcliff	102	4
	668	27

Estimated Cost of Service:-

Basing estimates of costs on current rates of pay for Wardens, installation and rental for telephones it is estimated that a fully implemented scheme would cost £12,000 per annum.

I recommend that:-

1. The scheme be accepted in principle.
2. Approval be given for a "pilot" scheme to be commenced initially in the Crosby area covering Giblin Cottages, and four other suitable areas.
3. The Establishment Committee be recommended to approve an establishment of 30 Wardens with authorisation to appoint up to 5 as required for the "Pilot" scheme.
4. Approval be given for the installation of telephones in the houses allocated to Wardens and for the payment of rentals.

March, 1972



Report of the Medical Officer of Health on Peripatetic
Warden's Services to the Tenants of Council Owned Aged
Persons' Dwellings

Consequent upon the resolution of the Establishment Committee held on the 28th April, 1972, Minute 1(a), Warden's Services have been introduced in selected areas.

Authority was given for the employment of five Wardens and to date four have been appointed. It is most important that the right type of person be selected for these posts in order to maintain our present high standards of service and therefore the filling of the first four posts allowed has been slow.

Our total housing stock of Aged Persons' Dwellings is :-	<u>838</u>	dwellings
Of this number, Grouped Dwellings total :-	<u>98</u>	"
Covered by the Peripatetic Warden's Scheme :-	<u>204</u>	"
Additional properties taken over by Wardens		
of Grouped Dwellings Scheme :-	<u>30</u>	"
Linked to L.C.C. Residential Homes :-	<u>12</u>	"
Total	<u>344</u>	dwellings

Residual number for which a service is still required 494 dwellings
I append below a breakdown of areas covered by Wardens Schemes.

PERIPATETIC WARDENS SCHEMES

	<u>Date of Appointment</u>	<u>Addresses</u>	<u>No. of Dwellings</u>
Area No. 1 Crosby	1.5.72	Giblin Cottages Barnes Crescent Lockwood Court Tomlinson Avenue	16 28 20 16 <u>80</u>
Area No. 2 Lincoln Gardens	1.9.72	Almond Grove Ash Grove Willow Grove The Cottages Alvingham Road	8 8 8 16 12 <u>52</u>
Area No. 3 Brumby	11.9.72	Healey Road Radcliffe Court East Common Lane	14 16 8 <u>38</u>
Area No. 4 Lower Riddings	1.11.72	Enderby Road Tattershall Close Walesby Road	16 8 10 <u>34</u>
<u>Grouped Dwelling Schemes</u>		<u>No. of G.D. Properties plus Additional Properties</u>	<u>Total</u>
Peterborough Road	40	-	40
Fryme Road	18	4	22
Keelby Road	18	10	28
Chatterton Crescent	22	16	38

Properties linked to Residential Homes
Tetley Road
Pear Tree Cottages

Due to the siting and grouping of dwellings it will not be possible to equalize the number of tenants covered by any individual warden.

The scheme has been very well received by the tenants and all reports have so far been very favourable. Already individual voluntary aid schemes are being started and one of the wardens has recruited the help of the local school children to assist in protecting the old people from being troubled by the more rowdy elements. Another has organised what is best described as a bulk collection and delivery scheme for medicines and prescriptions from the chemist.

Some suggestions have been made that this scheme should cover aged persons who do not live in Borough Council Aged Persons' accommodation. Considerable cover for these persons is already given by the Health Department through the Geriatric Visitors scheme, the Health Visitors and the District Nurses and it might be considered that the Housing Committee is discharging its responsibility fully in caring only for its own tenants. Responsibility for persons living in non-Borough owned property might well lie elsewhere.

Rather less than half of the Borough Aged Persons' dwellings are now covered by warden schemes and I advise that the scheme should be prudently extended to give cover to all the Aged Persons' dwellings in the Borough.

November, 1972.



Report of the Medical Officer of Health
Peripatetic Warden's Services to the Tenants
of Council owned Aged Persons' Dwellings

In accordance with Council minute 1(a) of the Establishment Committee 28.4.72, the authorised establishment of Five Peripatetic Wardens is now full.

Details of coverage are as appended below.

Peripatetic Warden's Schemes

<u>Area</u>	<u>Date of Appointment</u>	<u>Addresses</u>	<u>No. of Dwellings</u>	To
No. 1 Crosby	1.5.72	Giblin Cottages Barnes Crescent Lockwood Court Tomlinson Avenue	16 28 20 16	
			—	80
			—	—
No. 2 Lincoln Gardens	1.9.72	Almond Grove Ash Grove Willow Grove The Cottages Alvingham Road	8 8 8 16 12	
			—	52
			—	—
No. 3 Brumby	11.9.72	Healey Road Radcliffe Court East Common Lane	14 16 8	
			—	38
			—	—
No. 4 Lower Riddings	1.11.72	Enderby Road Tattershall Close Walesby Road	16 8 14	
			—	38
			—	—
No. 5 Grange Lane South	8.1.73	Bransdale Road Irvine Road Marshfield Road Somervell Road Southfield Road	6 2 3 13 16	
			—	40
			—	—

Coverage given to property adjacent to existing Grouped Dwellings		
Healey Road	4	
Enderby Road	7	
Willoughby Road	3	
Chatterton Crescent	16	
	—	
	30	30
	—	
Coverage given to property adjacent to Residential Homes		
Tetley Road	6	
Pear Tree Cottages	6	
	—	
	12	12
	—	
G.D. Schemes with Resident Wardens		98
Total number of properties at present covered by an appropriate service		388
Total number of A.P.D's		838
Total number of properties covered by service		388
Residual number of properties requiring Warden cover		450

The Borough Council has now approved a further extension of the scheme and approval has been given for a further ten wardens to be appointed during the next financial year.

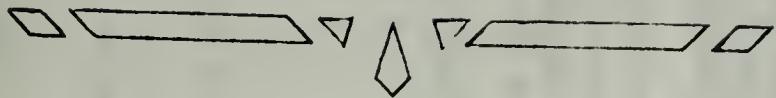
The scheme will be extended as indicated and the same care will be taken in the selection of staff and in attempting to deal with the areas which appear to have the greatest priority.

An outline scheme of the suggested extension is given but this must be understood to be liable to considerable alteration and variation and to be very dependent on the right type of staff being available in the right area.

<u>Areas</u>	<u>Addresses</u>	<u>No. of Dwellings</u>	<u>Tot</u>
6 & 7	Ville Road and Wharfedale Place St. Catherine's Court Cornwall Road Cambridge Road	28 24 4 12	68
		—	—
		68	68
Area No. 8	Split No. 1 Area Crosby into 2 areas and give cover as appropriate to the pensioners living in 2 bedoomed dwellings in the re-development area of Barnes Crescent.		
9	Marnetby Road Angerstein Road Willoughby Road Ranby Road Newstead House Cadney House	12 2 20 2 4 4	44
		—	—
		44	44
10	Kingerby Road Beesby Road	30 16	46
		—	—
		46	46
11	Queen Street (Frodingham) Leamington Court	4 16	20
		—	—
		20	20
12	Dryden Road	—	—
		54	54
13	Durham House York House	24 24	48
		—	—
		48	48
14	Cherry Grove Collum Avenue	30 12	42
		—	—
		42	42

15	Tensing Road	2	
	Hillary Road	28	
	Shipton Road	6	
	Milton Road	10	
	Bottesford Avenue	8	
	Legard Avenue	4	
		<hr/>	
		58	58
		<hr/>	
16	Emmanuel Court	24	
	Kendall Court	34	
		<hr/>	
		58	58
		<hr/>	
17	Church Court	<hr/>	
		<hr/>	
		12	12
		<hr/>	
			450
		<hr/>	

February, 1973.



THE AGED PERSONS' WAITING LISTS AND REQUIREMENTS FOR ADDITIONAL PROPERTIES

In my report to the Housing Committee on "Aged Persons' Dwellings in the Borough of Scunthorpe" compiled in August 1971, a complete analysis was given on all aspects of the Aged Persons' waiting lists, housing stock and further requirements over a ten year period.

Material for that report was formulated from retrospective statistics over a 10 year period in order to project future requirements over a similar period of time. My recommendation was as follows:-

"450 - 500 properties should be built within the period 1972 - 1981"

Events have overtaken this projection such as the modernisation programme of Council houses and regrettable delays in the commencement of proposed building programmes. It is now necessary to think in terms of an enhanced building programme not only because of the foregoing facts but due to the unprecedented growth of the waiting list particularly in the first six months of 1973.

The basic reasons may be attributable to:-

- a) Financial difficulties
- b) Modernisation programmes
- c) Seller's market

These items could be disturbing to elderly persons and cause them to think in terms of changing their life pattern.

I append below Table 1 showing the accelerated growth rate of the waiting lists between January 1971 and June 1973.

AGED PERSONS' WAITING LISTS

TABLE 1

Year	As at 31 Dec.		New Registrations		Cancelled Applications		Rehoused Transfers		At 31 Dec.	
	Applications	Transfers	New Registrations	Transfers	Applications	Transfers	Applications	Transfers	Applications	Transfers
1971	404	160	155	105	30	3	86	48	657	803
1972	445	214	177	112	30	25	47	41	-	-
1973	543	260	89	-	-	-	21	11	-	-
Jan -	-	-	-	-	-	-	-	-	-	-

TABLE II - Property Availability

This table covers the 18 month period from January 1972 to June 1973 and gives a complete breakdown on all allocations.

PROPERTY AVAILABLE - ALLOCATIONS BETWEEN APPLICANTS AND COUNCIL TRANSFERS

PROPERTY			APPLICANTS						TRANSFERS						
MONTH	NEW PROPERTY	REFERS	TOTAL	POINTS ORDER		COURT ORDERS	CLEARANCE AREAS		TOTAL	FROM GENERAL PURPOSE ACCOUNT.	PARK WARD	CLEAR-ANCE AREA	GENERAL PURPOSE TO GD	PARK WARD ENVIRON-MENTAL TO GD	
				APDS	GDS		APDS	GDS							
1972															
JAN	-	-	9	9	2	-	-	-	3	2	-	1	-	-	
FEB	-	-	7	7	1	-	-	-	5	2	1	-	-	6	
MARCH	-	-	3	3	6	2	1	-	3	1	1	-	-	3	
APRIL	-	-	4	4	2	-	-	-	3	1	1	-	-	1	
MAY	-	-	3	1	4	1	1	-	2	1	1	-	-	1	
JUNE	12	-	9	-	21	6	-	-	10	9	1	2	-	11	
JULY	12	-	5	-	17	9	-	-	9	7	1	1	-	8	
AUG	-	-	2	-	2	3	-	-	1	1	-	-	-	2	
SEPT	-	-	3	-	3	2	-	-	3	1	1	-	-	6	
OCT	-	-	10	-	10	2	-	-	3	1	1	-	-	4	
NOV	-	-	3	-	1	1	-	-	1	1	1	-	-	1	
DEC	-	-	1	-	1	-	-	-	1	1	-	-	-	1	
			24	59	5	28	31	3	-	11	-	45	22	14	2
1973															
JAN	-	-	6	3	9	2	1	-	1	1	-	2	-	-	5
FEB	-	-	2	1	3	1	-	-	2	2	-	1	-	-	2
MARCH	-	-	4	1	5	2	1	-	5	1	-	1	-	-	3
APRIL	-	-	3	1	4	1	1	-	1	1	-	1	-	-	8
MAY	-	-	4	1	1	1	-	-	2	1	-	-	-	-	1

Turnover of property was anticipated at approximately 63 dwellings per annum (see 1971 report, page 13).

The year January to December 1971 produced 65 vacancies,

The year January to December 1972 produced 64 vacancies,

The half year January to June 1973 has produced 35 vacancies.

At the present time there are 8 dwellings under construction in continuation programme of the Emmanuel Court Scheme.

Further known areas of development and the proposed number of properties as given by the Borough Architect in October, 1972, are:-

	<u>No. of Dwellings</u>
Emmanuel Court	8
Westcliff 6	15
Collum Avenue	5
Collum Avenue/School Road	10
Willoughby Road	3
Chatterton Crescent	10
Earl Street	40
Manley Street	40
	<hr/>
TOTAL	131 properties

With the possible exception of Westcliff all of the scheduled areas will be advantageous to and acceptable by elderly people. It must be hoped that other sites in equally desirable areas can be found.

Conclusions and Recommendations

My revised conclusions and recommendations are as follows:-

The figures show the high percentage increase of almost 90% in the number of persons making application for aged persons' accommodation since I made my report in 1971.

I therefore amend the figures as follows:-

<u>From</u>	<u>To</u>
450 - 500	900 Dwellings.

July, 1973.

Report of the Medical Officer of Health on the Annual Reports of the
County Medical Officer of Health and Principal School Medical Officer
of Lindsey County Council for the Year, 1971

The compulsory delegation scheme introduced on the 1st November 60 under the Local Government Act of 1958 places the services for Scunthorpe in a position which is very closely parallel to that of these services in Grimsby and Hull in that the Borough is in control of the services. The main point of importance is that the delegation scheme above officer level as is clear from section 3 of the approved scheme which says :-

"The Council is hereby authorised to exercise on behalf of the County Council for and in respect of the Borough and subject to and in accordance with the provisions of this scheme the functions specified in the first and second schedules of this scheme."

In my 1963 Annual Report I wrote as follows regarding this scheme :-

"During the year the first fruits of the delegation scheme began to appear in the Borough. A temporary clinic was opened in the Riddings Community Centre to cope with the large number of infants in this new estate. This clinic has been almost overwhelmed with work, which is a clear indication of how much work the new clinic will be handling when it is built. Later in the year a further temporary clinic was opened in the Berkeley area, in the Church of the Resurrection, this building was made available to us by the kindness of the Reverend J.A.I. Oliver, the Minister in charge, and fully justified itself by the number of Mothers who attend regularly.

A Midwives clinic was started in the Parkinson Avenue Clinic and it is hoped to offer the General Practitioners in the town the facilities of holding their own ante-natal clinics in the Clinic premises in conjunction with the Midwives at some future date when the proposed new clinics become a reality instead of a dream.

Another interesting development was the starting of a modified special care unit for one afternoon a week by the Scunthorpe British Legion Club which kindly provided a room, equipment and a bus to collect the children and return them to their homes. This has been a great success and there are usually attendances of more than 20 patients. The persons who are catered for are those who are severely handicapped, usually mentally, for whom no provision is made and the aim is to give the Mothers of these persons at least one afternoon's break in the week from the constant strain of caring for them. This scheme reflects great credit on the British Legion Club and its President for undertaking and subsidising and carrying on so successfully a venture of such an unusual nature.

The Health Services handed over by the County were at a very low ebb indeed. Staff were few. Establishments were based on pre-War requirements for a town of half the present population and were tied to availability of staff instead of requirements of the services. Salaries, conditions of service and incentive to work in the area were poor or non-existent.

Premises made available were also minimal in number and poorly equipped and maintained. The only permanent type building transferred to the Borough was the Parkinson Avenue clinic. This building is well built but has been in existence for many years and requires a great deal of maintenance work. The first requirement was complete re-wiring of the electrical system which was declared dangerous by the experts. The next step was the complete re-fitting of the dental surgery. The two dental chairs were so temperamental as to be dangerous to the unwary, and the drills were the old slow speed type which are out-moded in modern dentistry. The dental premises were such that only one dentist could be employed in the Borough although the Ministry recommendations suggested that three full time dentists should be the minimum establishment. The only other building transferred was the Ashby Clinic which was a temporary war-time structure converted and which could only be dealt with by demolition and replacement.

The Welfare services which are under a separate Committee at County level and are administered by a separate department, with the County Clerk at its head, but which have been brought together in the Borough under the same Committee and the same department, also earned similar comment. They were found to be deficient in extent and equipment and staff, to supply the minimal needs of a town the size of Scunthorpe. No buildings at all were transferred to the Borough from the County Welfare Department for the simple reason that not one building for Welfare purposes existed. Transfer of staff was on the same scale and the sum total was two Welfare Officers transferred - one for the needs of the blind and the other for the needs of physically handicapped persons. Little allowance was made for clerical staff and none at all for any senior grade experienced administratively trained welfare officers to advise the Borough in the necessary build-up of the Welfare Services. It is true to say that the Borough had more designated welfare officers already working in the Housing and Education Departments than the County thought fit to transfer or allocate to Welfare alone.

It is interesting to contrast the state of the Health and Welfare services handed over with that of the Education services delegated at the same time and to question why so many new schools could be built and equipped locally by the same Authority which so neglected Health and Welfare. The answer seems to lie in the fact that Education has already benefitted for many years from a form of delegation under the Divisional Executive Committee whereas Health and Welfare had not.

Last year it was noted that most of the friction between the County and the Borough on delegation revolved round four points which could be clarified by careful scrutiny. These four points are the meaning, content, level and extent of the delegation scheme. The scheme itself had not been published or distributed to any extent and a copy has been included in this report in the belief that ignorance and secrecy are inevitably the enemies of progress and the allies of misunderstanding and obstruction and therefore publication of the scheme must be an advantage to the Borough. From the scheme it can easily be

seen that the content of delegation is very wide and excludes only ambulance services and residential accommodation that the level of delegation is above officer level and at County and Borough Council level. The extent of delegation is still indefinite and one aspect of this is as to whether the County can deny the Borough control of any of the services on the grounds that the County provision already made or to be made outside the Borough is sufficient to cope with the demand within the Borough. The scheme stops at the Borough boundary and is compulsory, its conditions are binding on both Authorities".

I now draw attention to a letter I sent to Dr. Cormac dated 12th December, 1972 which reads as follows :-

"Re : Your Annual Reports for 1971

My attention has been drawn to the very misleading picture your reports present regarding the position of Scunthorpe in relation to the compulsory delegation of Health and Education Services.

I find that throughout the new County Humberside very few people appreciate how little knowledge and control Lindsey has of the Scunthorpe Services and your own reports make little or no mention of the true position.

Your map insert at page 4 of your report as Principal School Medical Officer is particularly inaccurate and misleading, so much so that I propose to put the whole matter before the Borough Health Committee in the near future and am merely writing to let you know this."

The reason for reporting on delegation at this time is that all the Authorities involved in the planning of the new Regional, Area and District Health Administration Units appear to be unaware of the true position of the Borough. So much so that the Nursing Officer in control of all the Borough nursing services was excluded from the first meeting of the Joint Liaison Committee, Nurses Sub Committee for Humberside and the Senior Area Dental Officer was not invited to the first meeting of the Dental Officers in the same area. Fortunately these two discrepancies have since been rectified.

The County Medical Officer of Health has, of course, full authority to write what he wishes in his annual reports but there are so many inaccuracies regarding Scunthorpe in them that might mislead the present Regional Hospital Boards and the new Regional and Area Health Boards, that I feel it necessary to list some of them.

Annual Report of the Principal School Medical Officer for 1971

- 1) There is no mention of the delegation scheme in this report. On page 4, Dr. H. Laing is designated as a School Medical Officer, in fact none of his work is school work.

Both he and Dr. N. Laing carry the appointment of Assistant Medical Officers.

- 2) Map opposite page 4. Area B Scunthorpe is given as the area of Dr. N. Laing. This is most misleading as no indication is given that the area is subject to compulsory delegation and that Dr. Cormac exercises no control over it.

- 3) Page 5. The Borough Area Dental Officers and Dental Officers and Assistants are listed with the County staff and no indication is given that they are not in fact under the control of the County Officers.
- 4) Page 6. Mrs. O'Reilly who is the Senior Nursing Officer in the Borough is listed as an assistant with no indication that she does not in fact do school work and that she is not in fact under the control of the Lindsey Officers.
- 5) Page 7. It is not true to say that there was a full Dental Staff at any time during the year in the Borough.
- 6) Page 9, paragraph 2. No change was made in the system in the Borough and it is therefore misleading to include the Scunthorpe figures in the County returns without an indication of the true position. I quote page 9, paragraph 2, below :-

"During the year a change was made to the selective school medical system which was adopted in 1967. The system introduced in 1967 was to use the selective system for children at the ages of 8 and 12 years."

- 7) Pages 12 and 13. The Hearing and Vision testing routine followed by County is different from that of the Borough in several respects.
- 8) Page 17. The Borough does not use a Keystone viewer.

Annual Report of the Medical Officer of Health for the year 1971

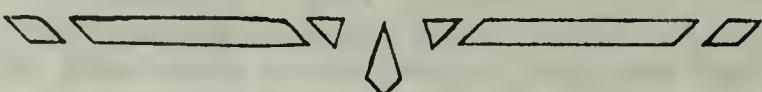
There is no mention of the delegation scheme in this report.

- 1) Page 8. Drs. N. and H. Laing are listed as Medical Officers in the Department. This is misleading as they are not Medical Officers in the County Department but the Borough Department.

No mention is made of the Borough Practitioners who do sessional work in the clinics.

Mr. McCutcheon is named as a Dental Officer in this report and as a Senior Dental Officer in the School Report.

- 2) Page 29. Dental posts in the Borough have never been fully staffed.
- 3) Page 31. Most of the tables include Scunthorpe but this table excludes Scunthorpe and no explanation is given for this.
- 4) Page 33. The Borough has not had the full establishment of Health Visitors at any time during the year.
- 5) The remark on page 6, third paragraph, that Scunthorpe has a Health Visitor establishment related to National standards while the rest of Lindsey has an establishment related to availability is not now correct as Scunthorpe has been refused an increase in Health Visitors asked for in accordance with D.H.S.S. Circular No. 13/72.



Report of the Medical Officer of Health on Scunthorpe South
Health Centre

The Minute of the Health Committee of July, 1973, which notes that there will be no money for Health Centres in 1973/74 presents an opportunity to review the plans for this Health Centre and to reconsider the problems regarding this site.

The Borough has been putting forward the concept of two large Health Centres for the Borough for many years and had meetings with the General Practitioners as long ago as 1958. About three years ago a certain amount of harmony and unanimity of purpose seemed to enter into the deliberation of the Borough and the County and the two authorities started to move in the same direction towards an attempt to get one or other of these Health Centres started. A site on Ashby High Street was agreed upon and the County Council agreed to proceed with the problem of purchasing the site which was not at that time completely in the hands of either of these two authorities. The size and area of the site agreed was a rectangle of ground enclosing the car park at present owned by the Borough Council and properties 301 and 303 which had large gardens to the rear. All this ground was acquired by the Borough or the County except property 303. Property 301 and property 303 are two semi detached houses and therefore the failure to obtain property 303 means that property 301 cannot be knocked down and much of the ground previously considered to be essential for the building of a Health Centre is not now at present available. A series of diagrams has been introduced to illustrate the position and to show how very serious is the handicap imposed by the failure of the County Council to buy property number 303. The first diagram shows the area originally agreed as being necessary. The second diagram shows the area acquired. The third diagram shows the area which can be used for the Health Centre and includes the most recent attempt by the Borough Architect to fit a Health Centre onto the site. It will be seen from these diagrams that there are so many serious disadvantages to the present site that it is probable that a satisfactory Health Centre can never be planned unless property 303 is made available.

The disadvantages are as follows:-

1. The walking distance from Ashby High Street to the main public entrance is about 70 yards.
2. All the facilities cannot be housed on the ground floor and therefore an upstairs section is essential and so far the planning of this upstairs section has failed to be acceptable.
3. The planning of the main entrance is such that a main entrance is not really possible, also a large and attractive looking reception area is again not really possible because the entrance will require to be on the side of the building.

The advantages to be obtained by the addition of property 303 are:-

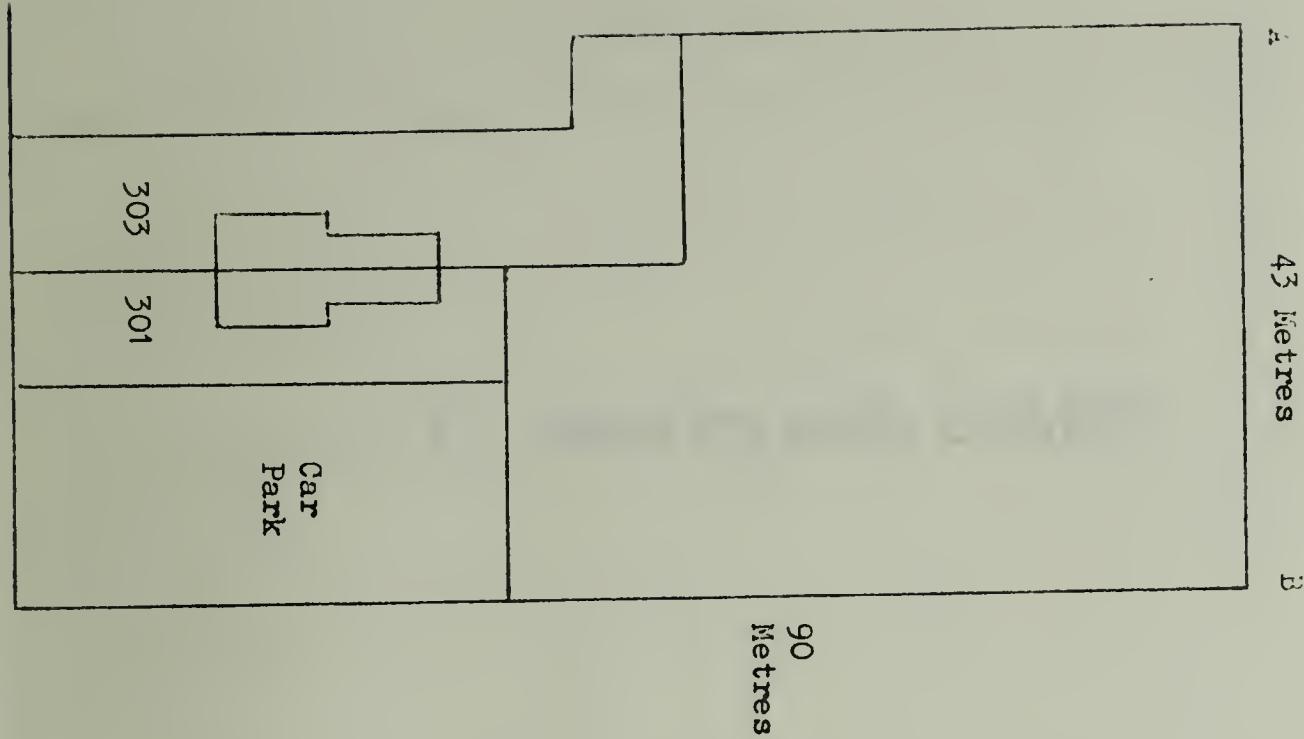
1. The whole of the accommodation will be on a ground floor level.
2. The Centre will be brought close to Ashby High Street and a suitably attractive main entrance and reception area can be planned.
3. The walking distance from the street would be reduced to a few yards.

There is already ground available for parking facilities for over 70 cars at the rear and bringing the whole building forward would increase this parking space.

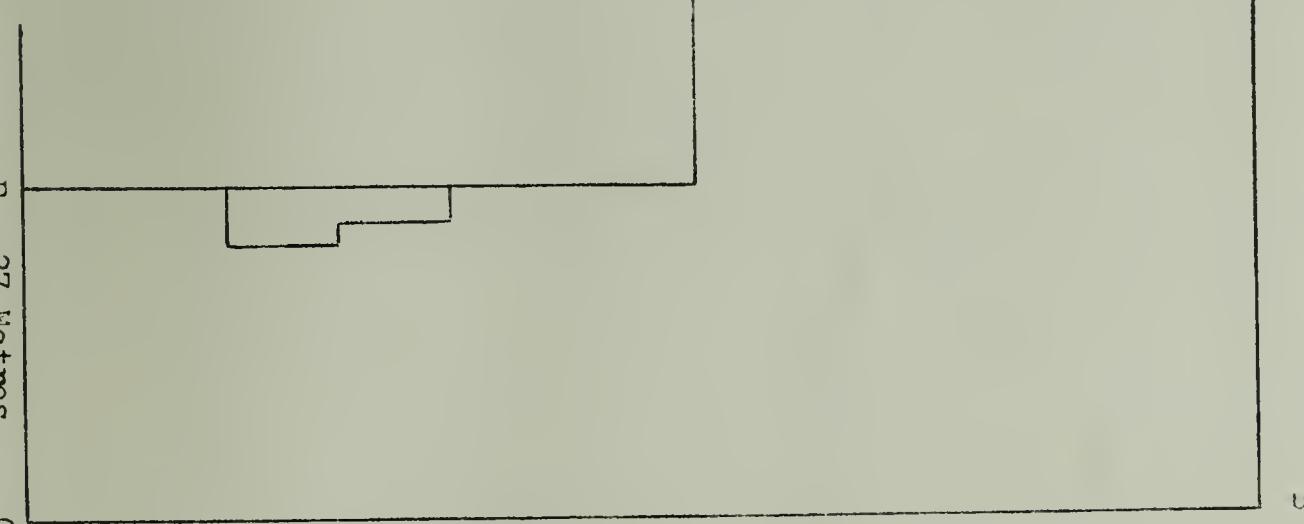
I advise that steps be taken immediately to obtain property 303 so that this site as originally requested can be made available in its entirety. Failing this I advise that all further action be abandoned and the whole scheme and concept of a Health Centre South be left in abeyance until April, 1974, which is only six months away when the new Yorkshire Regional Health Board will take over full responsibility and can be expected to make Scunthorpe Health Centres both North and South a fairly high priority in its programme.

September, 1973.

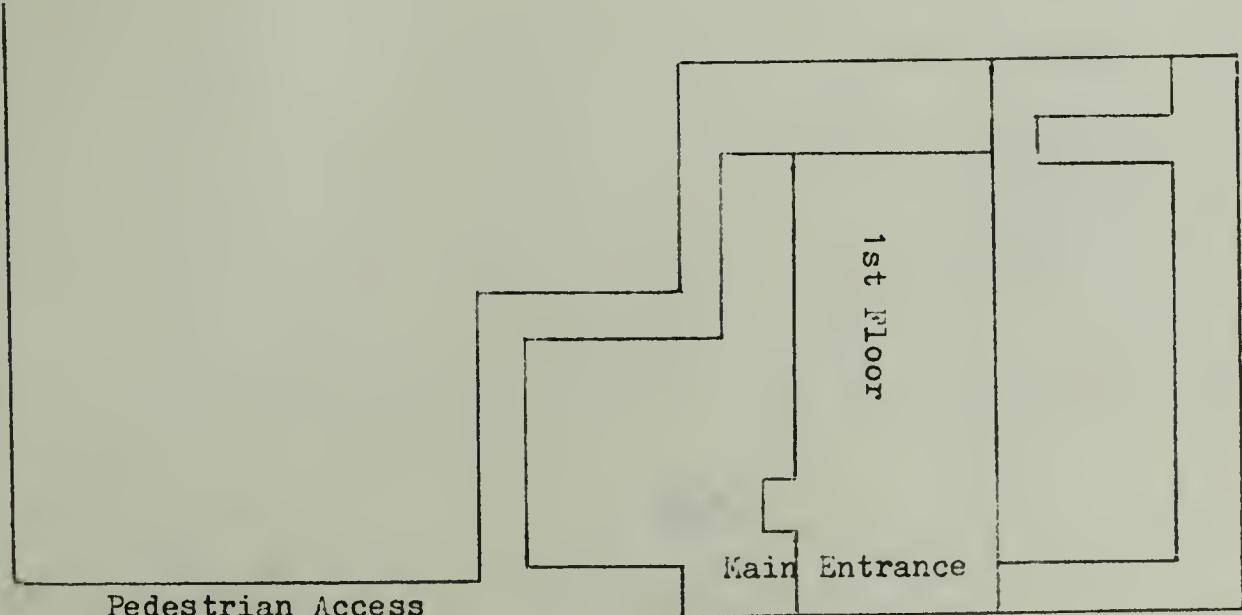
1st Diagram



2nd Diagram



3rd Diagram



F GRAPHS AND CHARTS

GRAPHS AND CHARTS

The first set of charts show the growth of the town over the years and relate to the inevitable build up of residential property.

The first chart relates to the conditions and the year 1885 when there was no town but only 5 small villages set in the green fields of Lincolnshire. The small villages of Crosby, Scunthorpe, Frodingham, Brumby and Ashby can be seen as distinct and separate entities. The total population at this time was about 6,000.

The second chart shows the built up area in 1911 when the census gave the combined population as 19,360.

The third chart shows the built up areas about the year 1931 when the census showed the population to be 33,990.

The fourth chart shows the town at about 1951 when the census population was 54,030.

The last chart numbered 5 shows the town in 1971 when the census population was 70,480.

1. These charts clearly show how rapidly the town has grown but do not include the industrial areas. Scunthorpe has now little housing land available within its boundaries and it is therefore unlikely that the population will be able to increase while the boundaries remain unchanged. It is in fact not unlikely that the build up of industry within the borough will displace some of the present residential property and that the population will decrease. The modern tendency for dormitory areas to grow up at some distance from industry has of course developed very markedly round Scunthorpe and several thousands of persons now live in the small villages near Scunthorpe. This trend now depends entirely on the motor car and the petrol engine and such commuters will be liable to face considerable difficulties if there is a crisis in petrol supplies or if the warning that petrol supplies will be exhausted before the end of this century becomes a reality. Meanwhile the commuters are receiving the benefits of free services in the borough for which they pay no rates and it might be reasonable to issue all borough owned motor cars with free parking permits and charge all out of town motor cars a parking fee.
2. The graphs for the various infectious diseases have been brought up to date and reproduced from last year and a graph showing the mortality rate for Respiratory Tuberculosis has been added. The great achievements of Medical Officers of Health in the past century or so have been in the control of the communicable diseases and in the elimination of the obvious deficiency diseases such as Rickets and Scurvy and these graphs are the proofs of the results in Scunthorpe. Similar graphs can be produced throughout the length and breadth of the country and in view of the liquidation of the statutory post of Medical Officer of Health in 1974 it is reasonable to ask will the graphs be as favourable to the public in ten years time or so.

Good results depend both on knowledge and on the applying of the knowledge to the problems and I feel safe in forecasting that the graphs will be less favourable ten years hence because although the knowledge will still be available the new administration appears to be such that its application at "District Level" will be a relative failure. As a demonstration of this I use the words "District Level" and nobody can tell whether I mean Local Authority District or Health Authority District. These two district units are never co-terminous and are almost totally unrelated to each other and yet much of the responsibility for action is either on a shared basis or is not yet clearly defined.

Births and deaths are the essential elements of all Health Statistics and therefore the graphs of the total number of births and the total number of deaths have been included and it will be seen that the number of births has been dropping rapidly since about 1965.

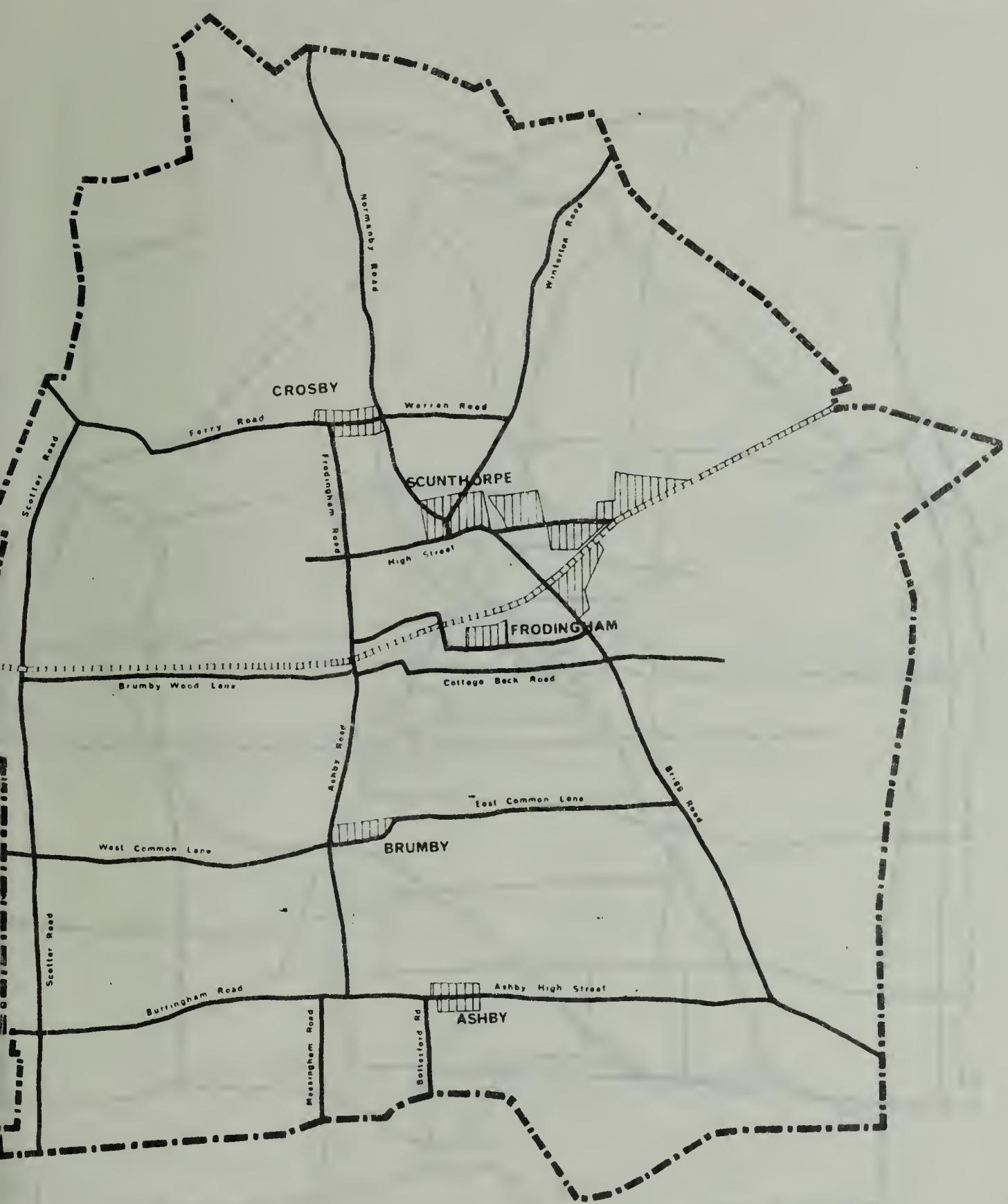
Two further graphs one giving the number of illegitimate births in the town, the other giving the Infant Mortality Rate are also included for the first time.

3. The Infant Mortality Rate is interesting and it can be seen from the Infant Mortality Rate for England and Wales which is also shown on the graph that Scunthorpe did better than England and Wales right up to the Post War period of about 1948 and from then the England and Wales rate has been almost invariably lower than the Scunthorpe one. This should not be seriously attributed to the effects of the newly nationalised Health Service on the infants of Scunthorpe but I have repeatedly suggested that a most likely cause has simply been that about 1948 the infant population of Scunthorpe overstrained the very limited hospital bed and cot accommodation for infants and this necessarily meant that sick infants who might well have been hospitalised in more favoured parts of the country could not receive hospitalisation in Scunthorpe because the facilities were just insufficient to cope.

It will be very interesting to watch the figures for the next few years now that extra accommodation for sick children is projected.

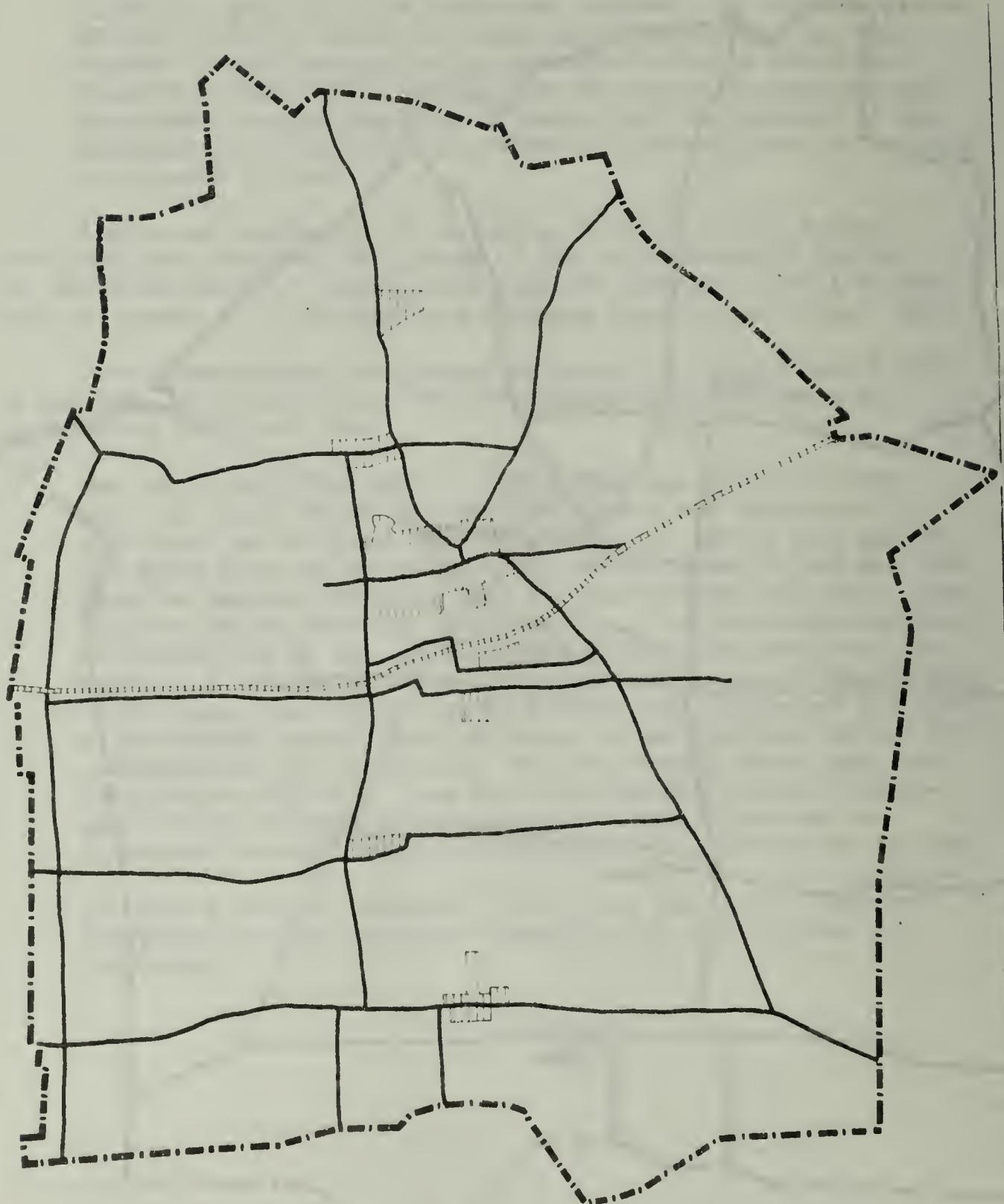
GROWTH OF THE BOROUGH OF SCUNTHORPE

POSITION AS AT 1885



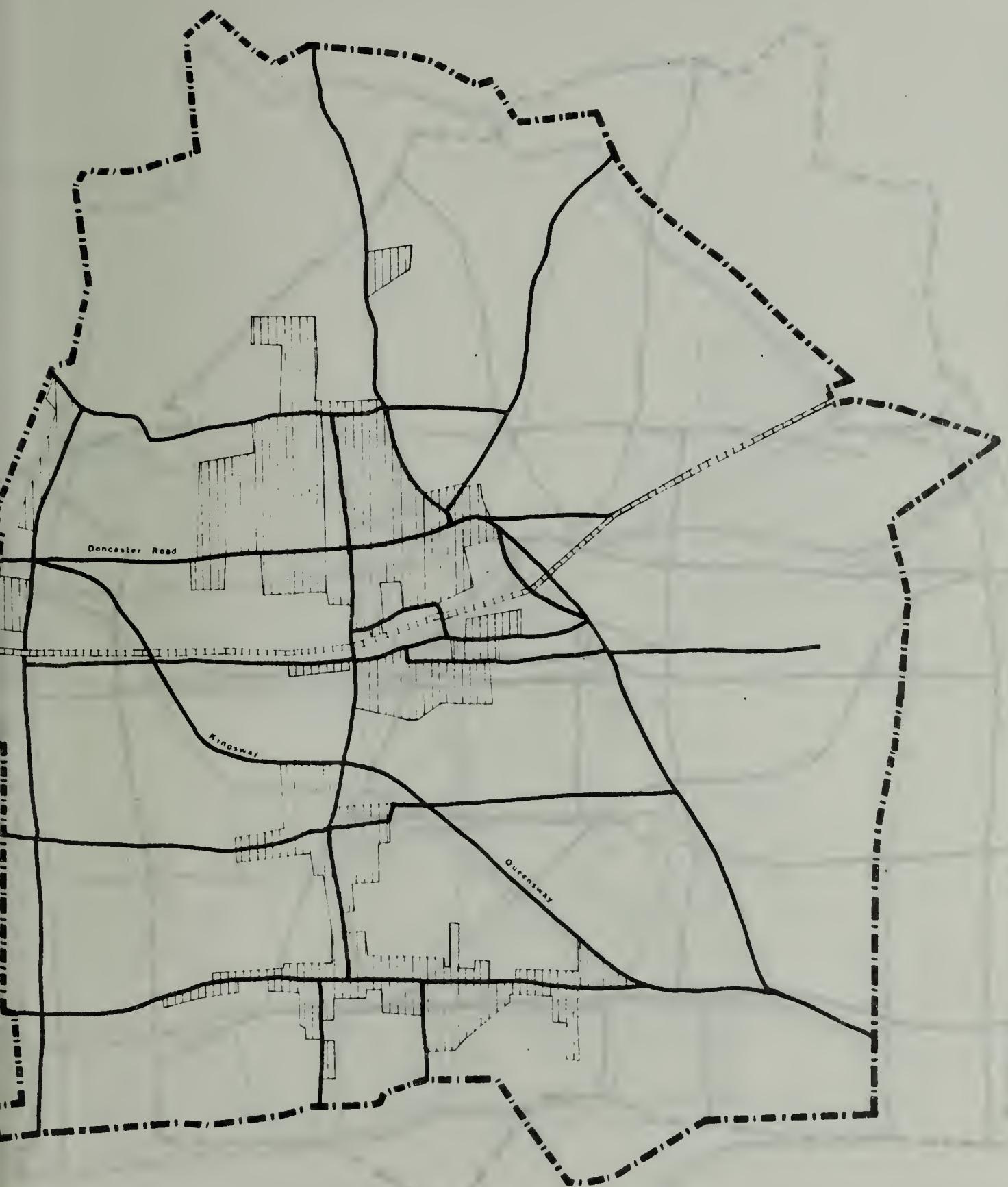
GROWTH OF THE BOROUGH OF SCUNTHORPE

THE YEAR 1911



GROWTH OF THE BOROUGH OF SCUNTHORPE

THE YEAR 1936



GROWTH OF THE BOROUGH OF SCUNTHORPE

THE YEAR 1951



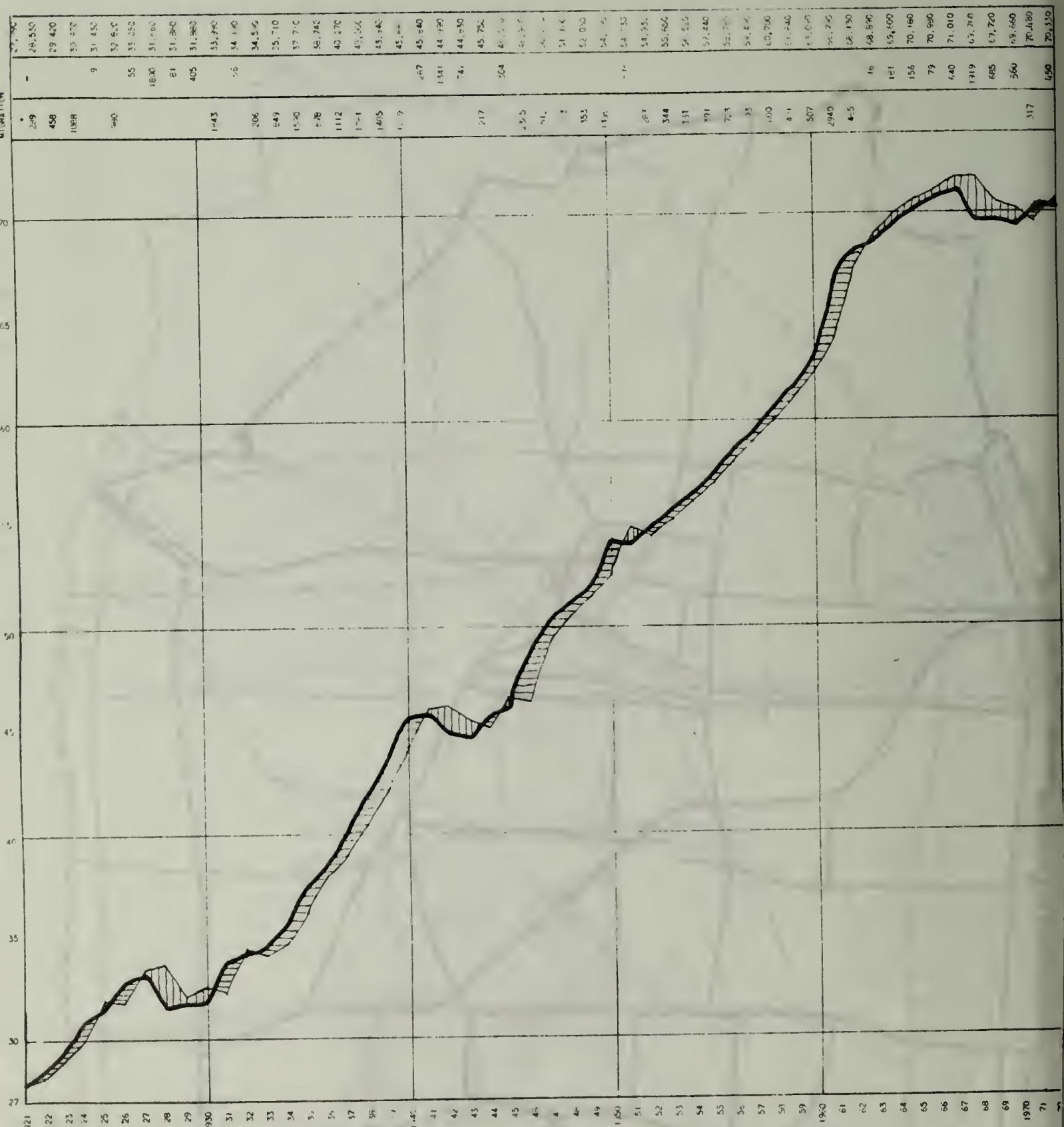
GROWTH OF THE BOROUGH OF SCUNTHORPE

THE YEAR 1971

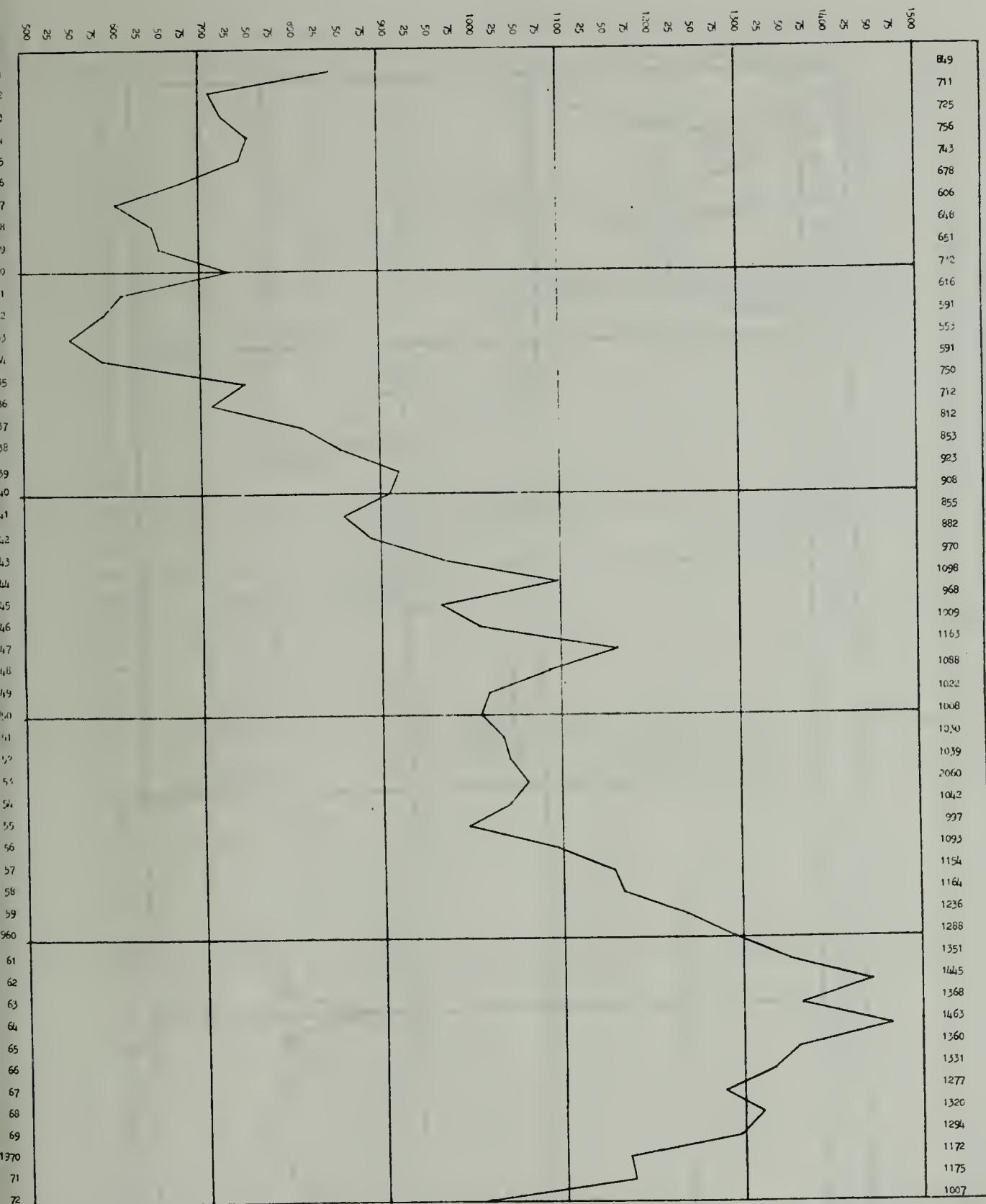


POPULATION AND MIGRATION

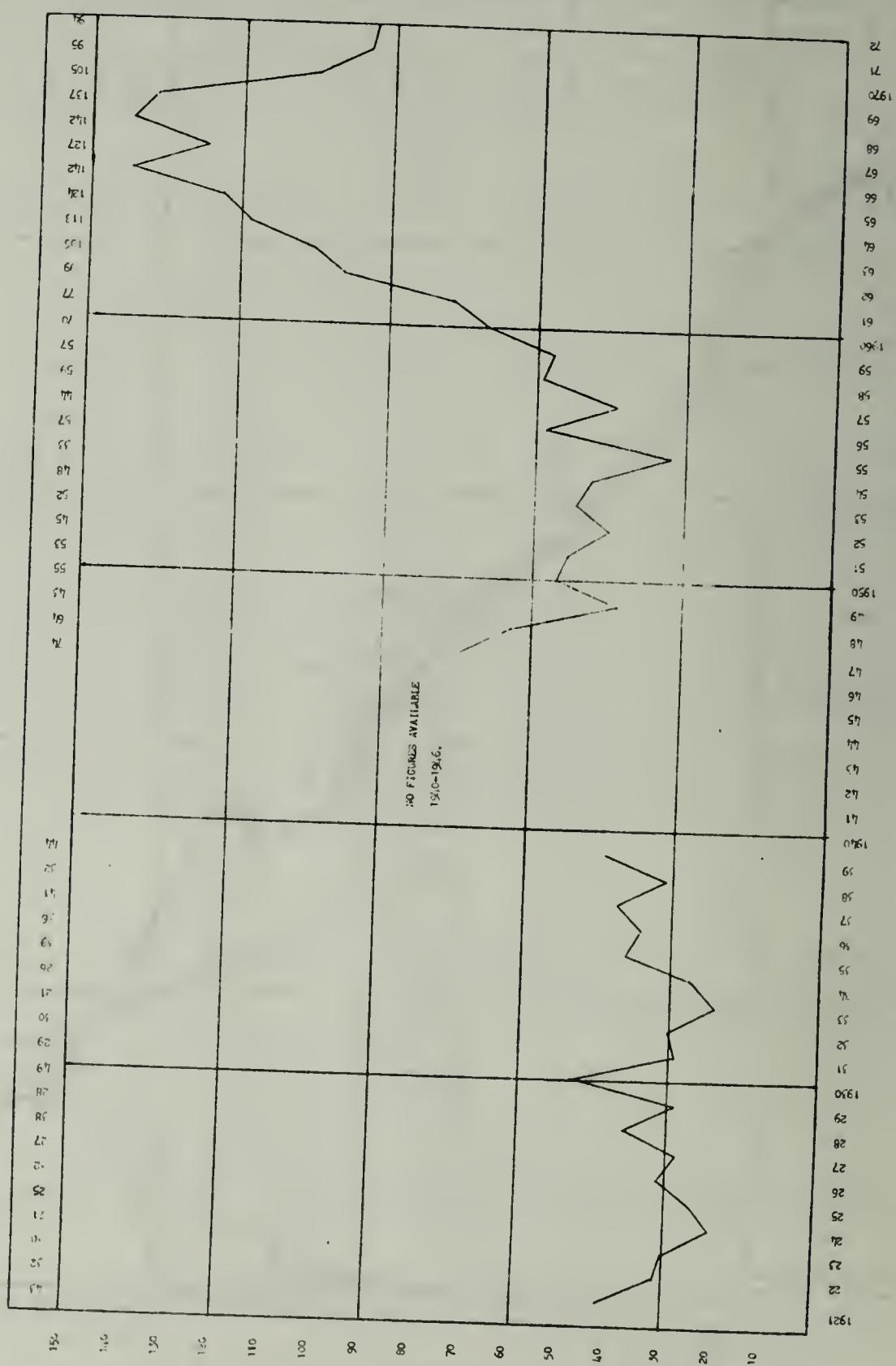
1921 to 1972



LIVE BIRTHS 1921 - 1972



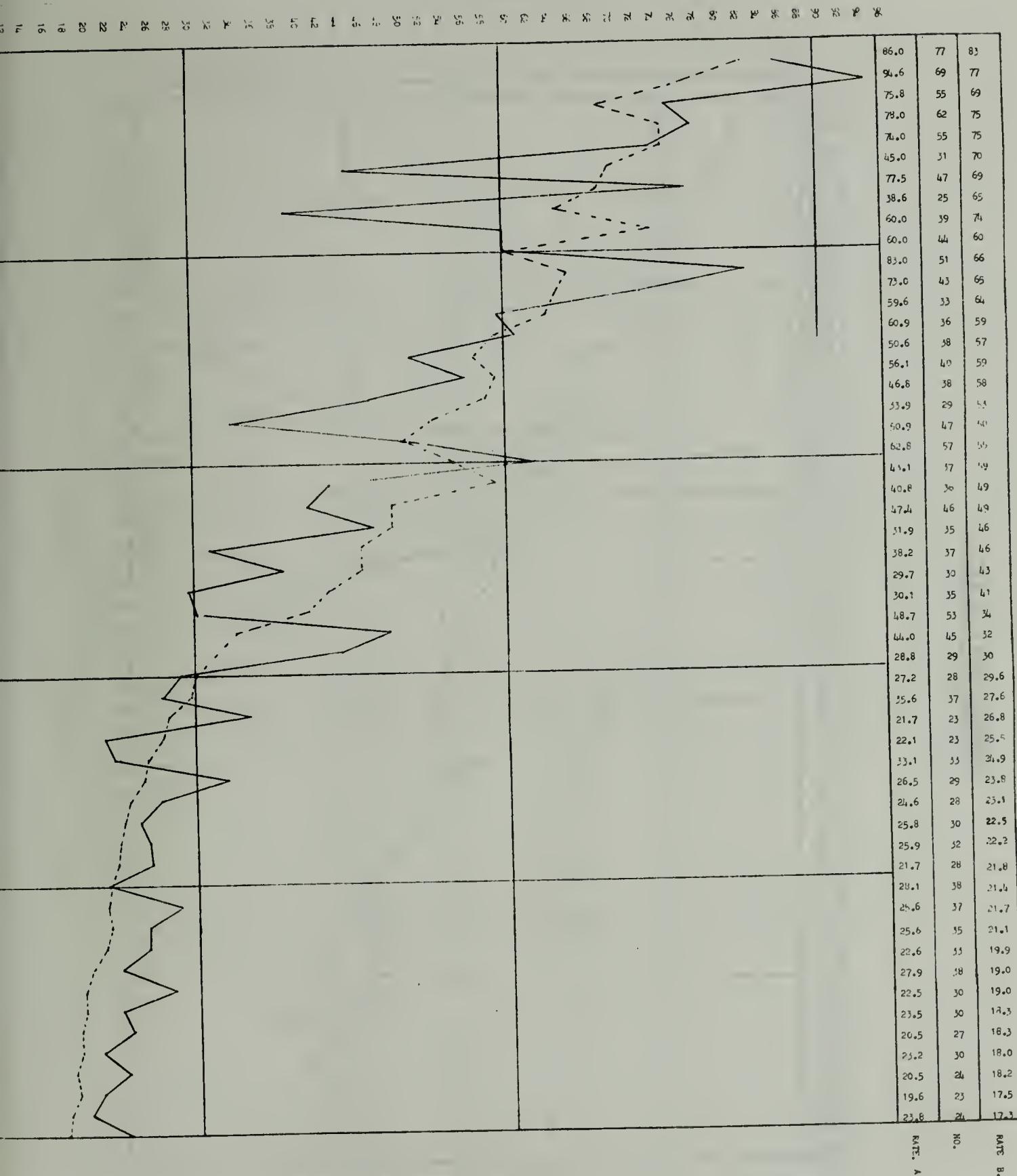
ILLEGITIMATE BIRTHS 1921 - 1972



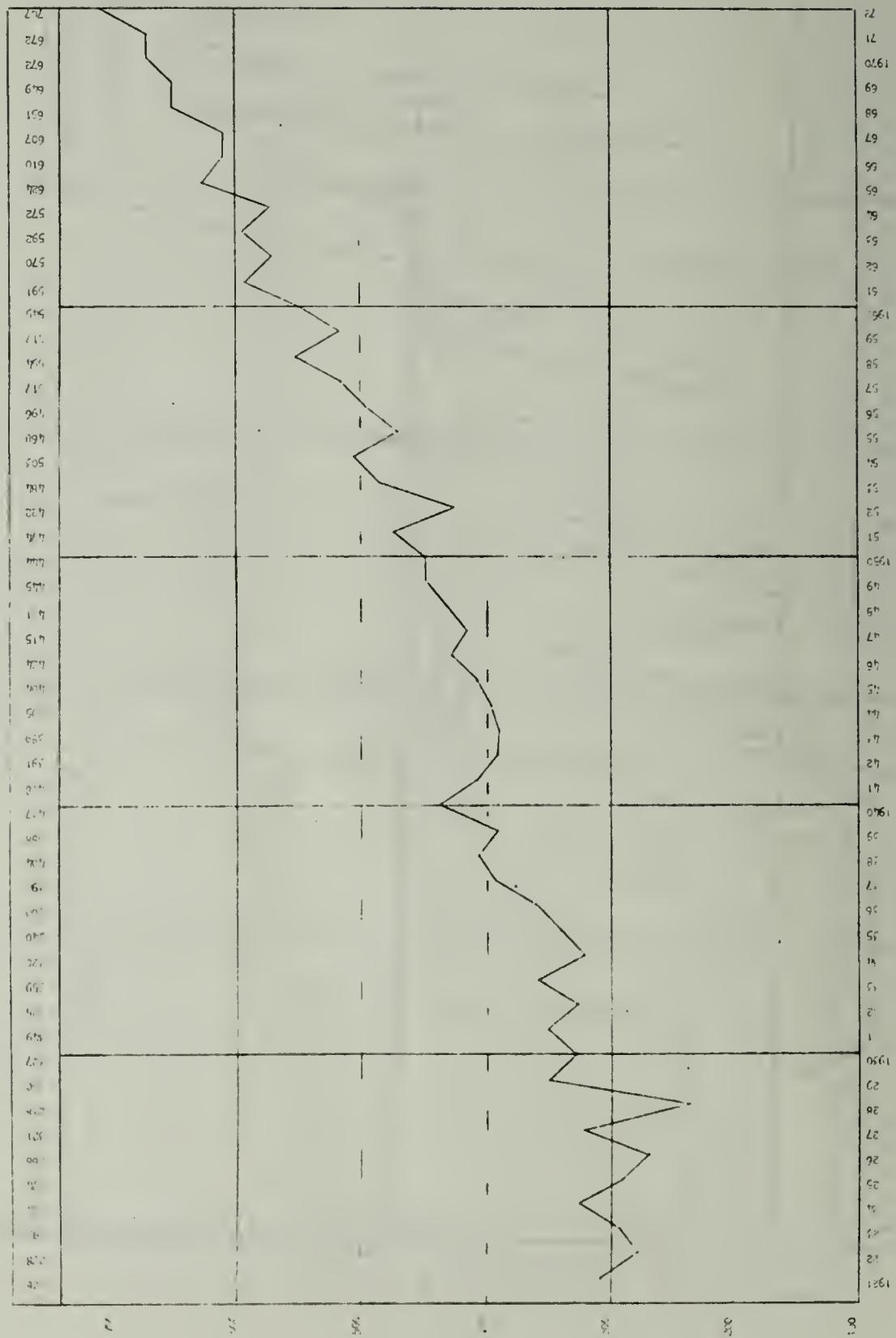
INFANT MORTALITY RATE 1921 - 1972

SCUNTHORPE RATE (A)

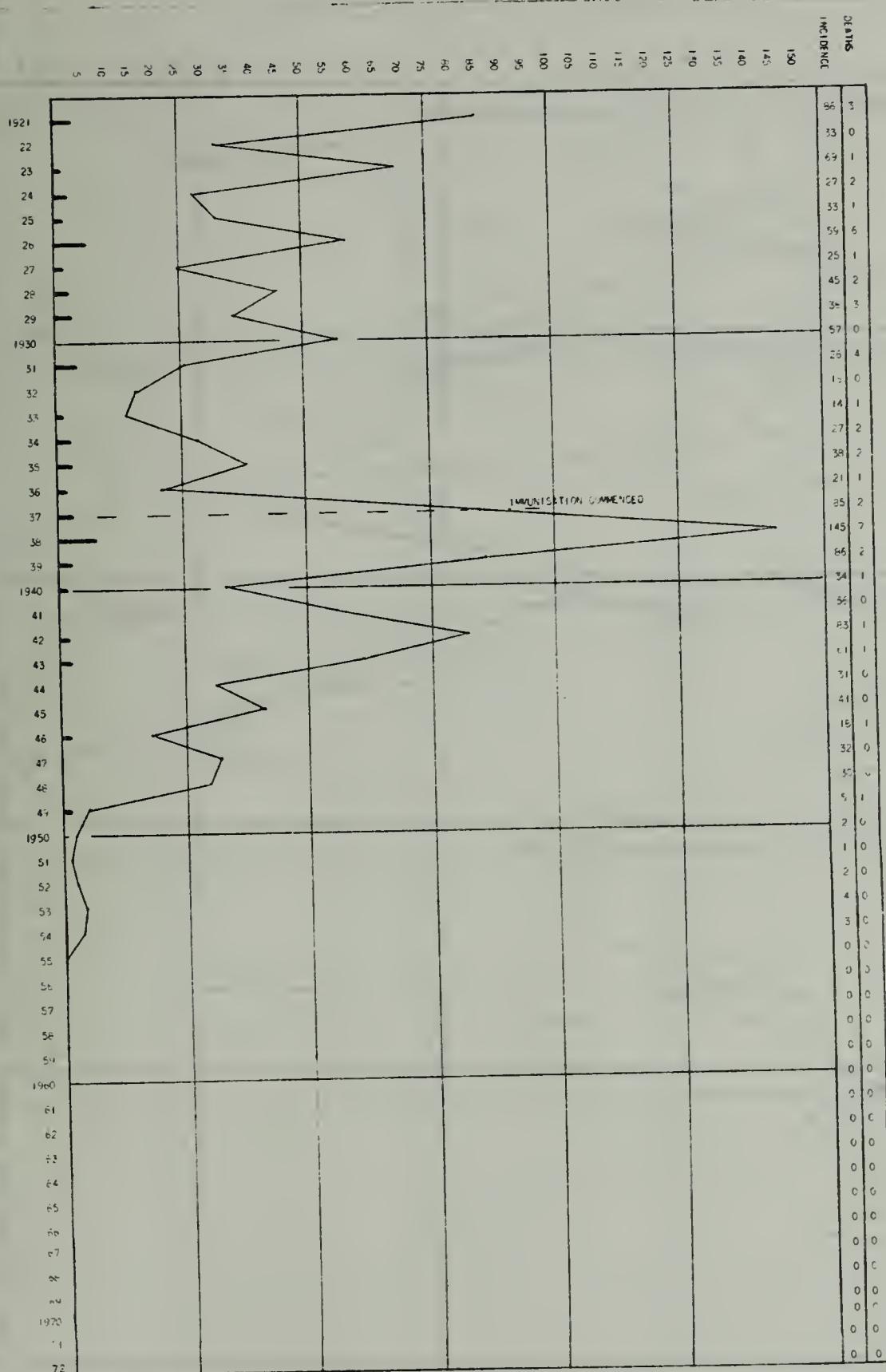
ENGLAND AND WALES RATE (B)



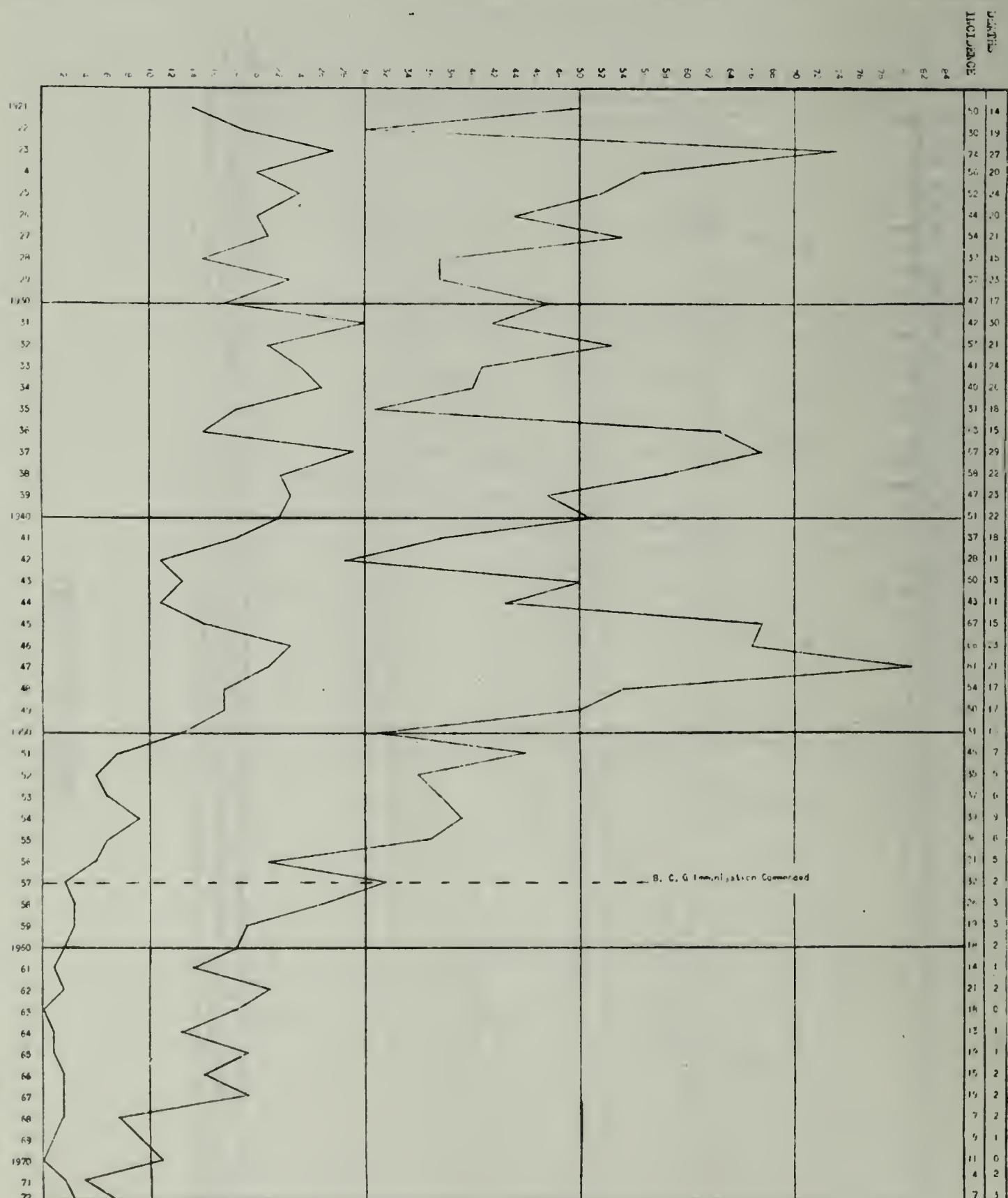
DEATHS 1921 - 1972



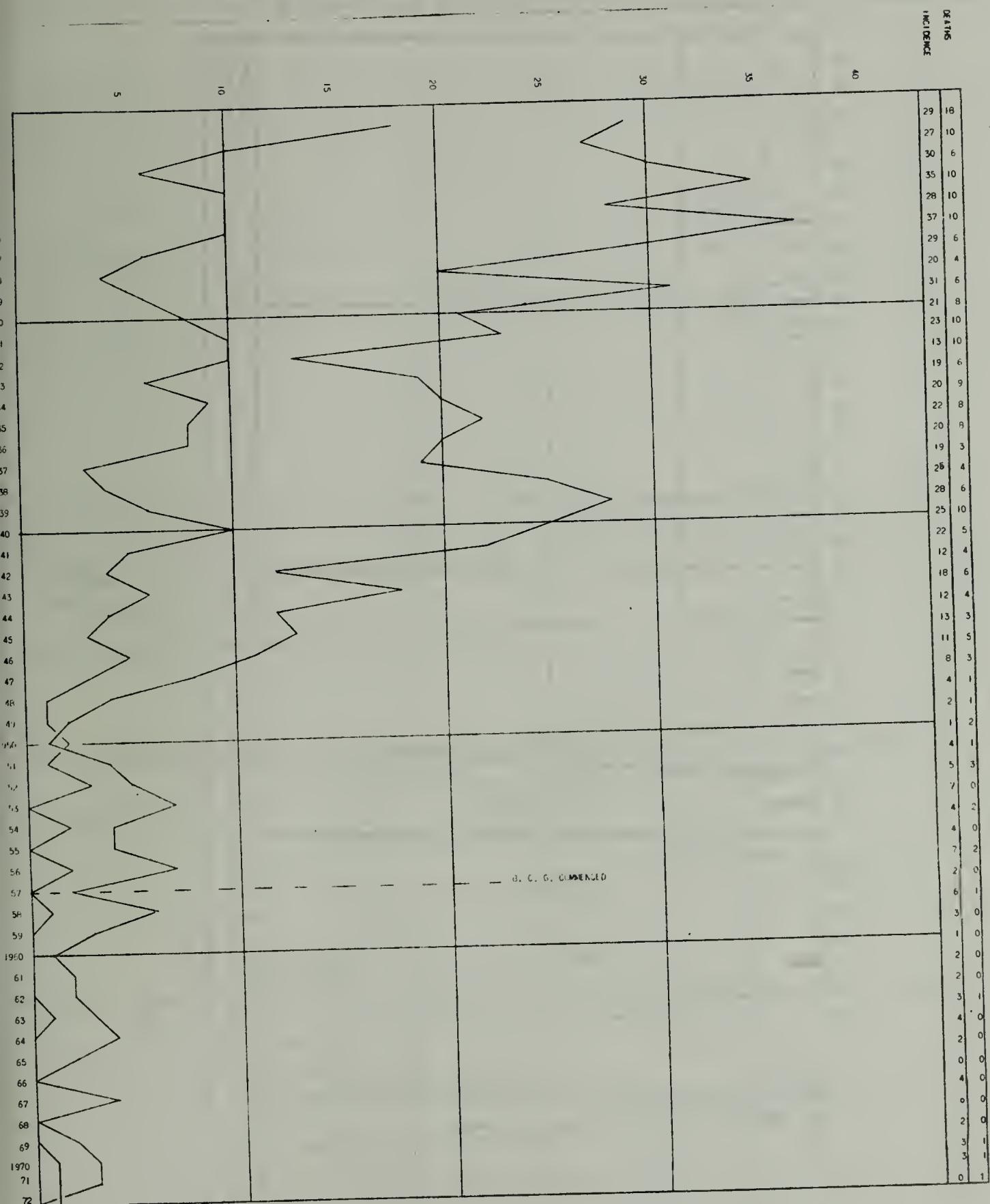
DIPHTHERIA
INCIDENCE AND DEATHS - 1921 to 1972



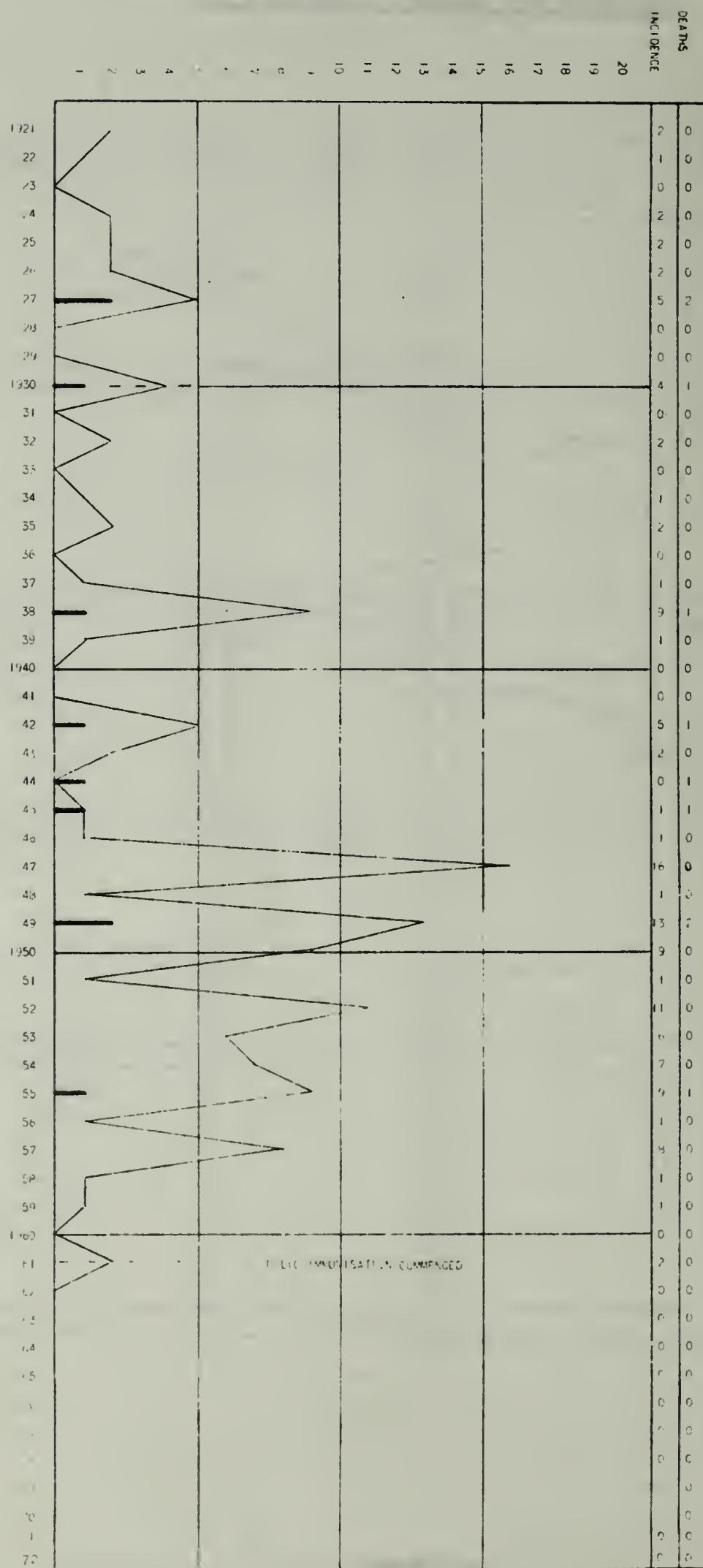
RESPIRATORY TUBERCULOSIS
INCIDENCE AND DEATHS - 1921 to 1972



NON-RESPIRATORY TUBERCULOSIS
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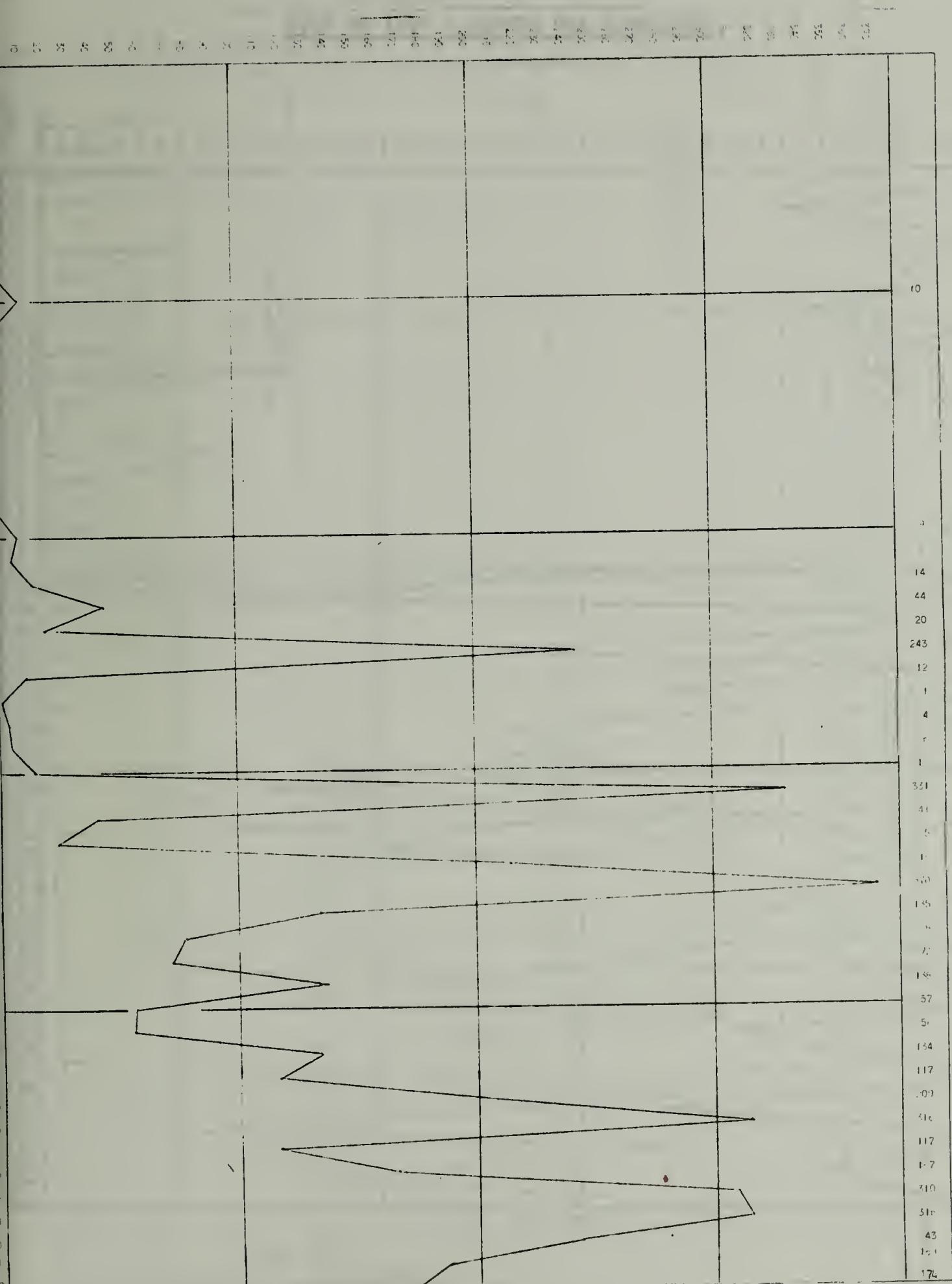


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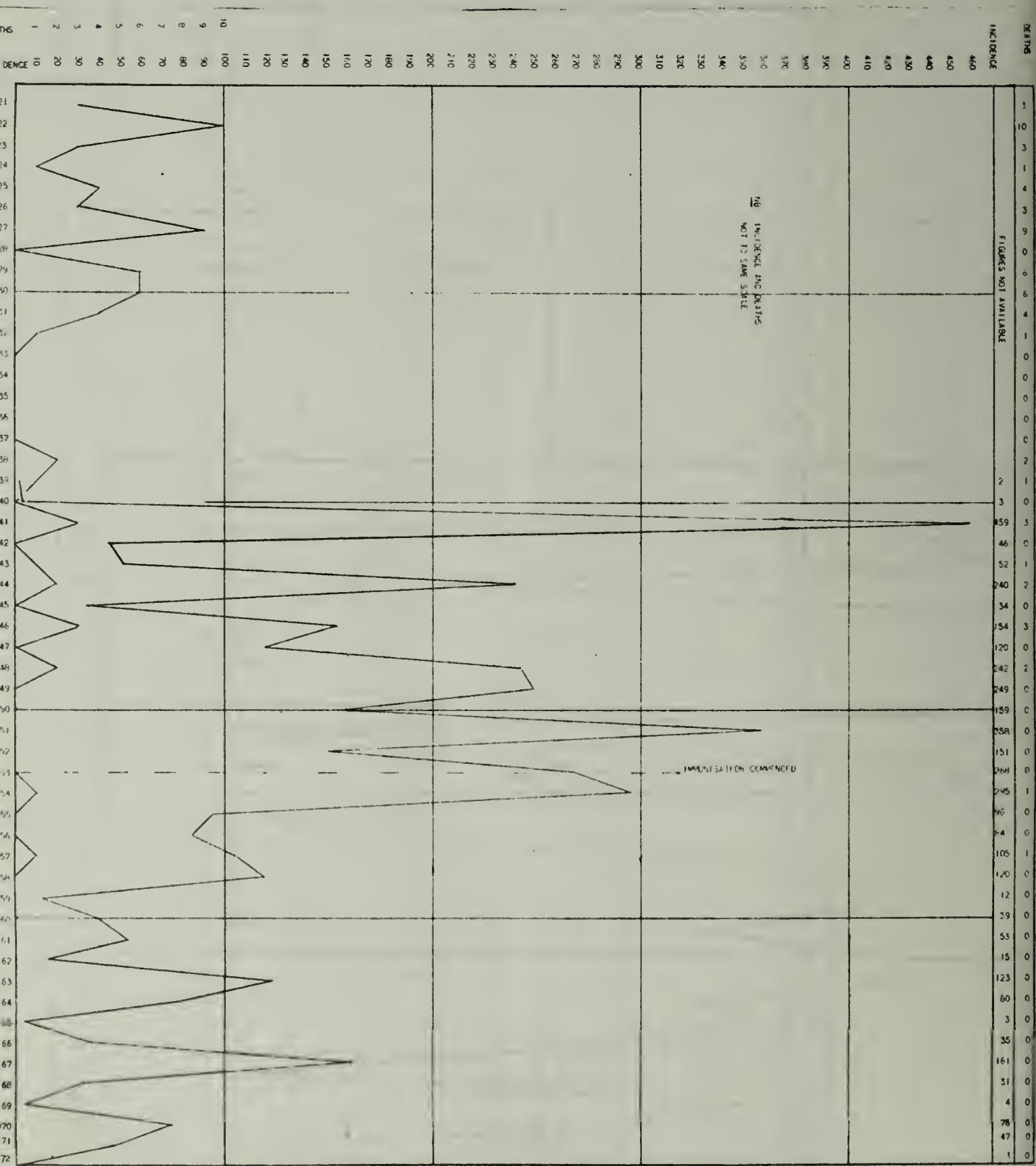
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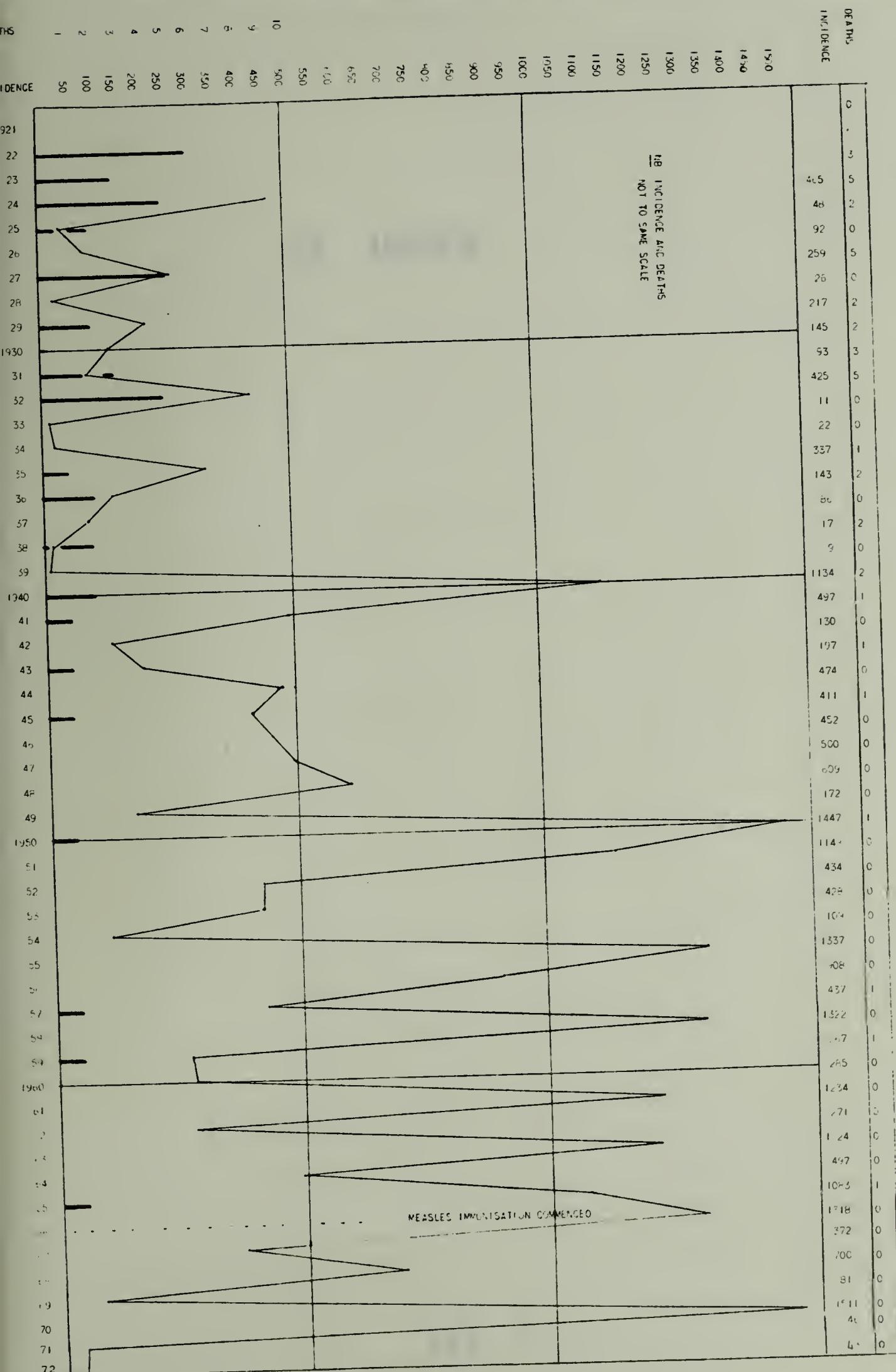
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